

ANNUAL SITE INSPECTION CHECKLIST

A comprehensive site inspection has recently been completed. This annual inspection is performed to evaluate the effectiveness of controlling stormwater contamination and to identify any additional measures that can be feasibly implemented. The Stormwater Pollution Prevention Plan has been revised to reflect any changes.

CHECKLIST FOR ANNUAL INSPECTION:

1. Inspect site drainage conditions. Things to look for include the following:

- Inspect the site for possible erosion problems. - ok
- Determine if drainage off the Property has changed. Are there any new areas of ponding or streaming? - none
- Are there any unusual stains around storage areas or along overland stormwater flow paths? - none

Notes: _____

2. Check for any potential pollution sources. These sources may include the following:

- Inspect the yard waste storage areas. Is there any indication excessive sediment or organic material? ok
- Inspect outdoor storage areas. Are there un-used materials that may be disposed of? ok
- Inspect the area near the dumpster. ok
- Inspect the area around the Salt/Sand Shed. -ok
- If there is any standing water at the time of inspection, are there sheens, sludge, foam, or rust precipitations? none
- Inspect all areas of the Property for signs of spills (oil, grease, etc.) or other contaminants. none

Notes: _____

3. Perform the following preventive maintenance activities:

- Inspect the dumpster cover for proper operation. ok
- Inspect the drain opening located in the bottom of the dumpster to verify that it is plugged. ok
- Check the spill kit contents. ok

Notes: _____

**Stormwater Pollution Prevention Plan
Public Works Garage**

City of Fort Atkinson, Wisconsin

Report

4. Review the Best Management Practices that have been used.

- Are the Best Management Practices being followed? Yes
- Are the Best Management Practices effective? Yes
- Are there any additional management practices that should be implemented?

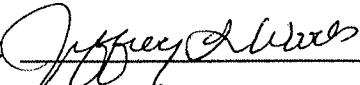
Notes: LOOK AT PAVED SIDEWALKS LIST AT EAST END OF BLOCK NORTH
TRUCK SIDE

5. Other observations – take note of anything else at the Property that may be of significance to the Stormwater Management Plan.

Notes: _____

Please outline the revisions and amendments that need to be made to the Stormwater Management Plan.

This annual inspection certification is to indicate our commitment and continual support for this Stormwater Pollution Prevention Plan. An annual site inspection has been conducted and based on the findings from the inspection; the Stormwater Pollution Prevention Plan for this facility will be amended accordingly.

Signed: 

Printed Name: JEFFREY L. WOODS

Title: CITY ENGINEER

Date: 4/20/13

Facility: City of Fort Atkinson
Public Works Garage
700 James Street
Fort Atkinson, WI 53538

Telephone: 920-563-7260



Stormwater Pollution Prevention Plan

Public Works Garage

City of Fort Atkinson, Wisconsin

Report

Non-Stormwater Discharges

Facility Inspected:

Name: City of Fort Atkinson, Public Works Garage

Location: 700 James Street, Fort Atkinson, WI 53538

Evaluate all outfalls for non-stormwater discharges during normal business hours. Evaluations should take place during dry periods. Observations should be made **twice a year**.

OUTFALL 1 (BASIN North)

Is there currently water flow or evidence of dry weather flow?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 2 (BASIN South-1)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 3 (BASIN South-2)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____



OUTFALL 4 (BASIN South-3)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 5 (BASIN South-4)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 6 (BASIN South-5)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

Inspected by:

(Signature) *Jeffrey L. Woods*
Name: JEFFREY L. WOODS
Date: APRIL 22, 2010
Time: 2:00 PM



Stormwater Pollution Prevention Plan

Public Works Garage

City of Fort Atkinson, Wisconsin

Report

Non-Stormwater Discharges

Facility Inspected:

Name: City of Fort Atkinson, Public Works Garage

Location: 700 James Street, Fort Atkinson, WI 53538

Evaluate all outfalls for non-stormwater discharges during normal business hours. Evaluations should take place during dry periods. Observations should be made **twice a year**.

OUTFALL 1 (BASIN North)

Is there currently water flow or evidence of dry weather flow?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Other observations:	_____			

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 2 (BASIN South-1)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Other observations:	_____			

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 3 (BASIN South-2)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Other observations:	_____			

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____



Stormwater Pollution Prevention Plan

Public Works Garage

City of Fort Atkinson, Wisconsin

Report

OUTFALL 4 (BASIN South-3)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 5 (BASIN South-4)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

OUTFALL 6 (BASIN South-5)

Is there currently evidence of dry weather flow in the basin?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there stains or coloring?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there sludges?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Are there odors?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland Other _____

Inspected by:

(Signature) Jeffrey L. Woods

Name: JEFFREY L. WOODS

Date: SEPT. 30, 2010

Time: 9:30 AM



QUARTERLY VISUAL STORMWATER INSPECTION

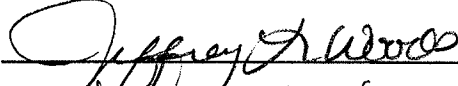
Instructions: Quarterly inspections should be conducted to document that the provisions of the SWPPP are being followed, and to identify areas needing improvement. The completed forms should be placed in Appendix B, and kept for at least 5 years.

Date: JUNE 15, 2010

Time: 1:00 PM

Weather Conditions: CLOUDY & RAIN

AREAS	BASIN North (Parking area, vegetated areas, building #3, outdoor storage, part of building #5)	BASIN South-1 (Part of building #2 & outdoor storage)	BASIN South-2 (Parts of buildings #1, #2, & #5, outdoor storage, parking area, & fueling area)	BASIN South-3 (Park of building #1, yard waste drop-off area, & parking area)	BASIN South-4 (Park of building #1 & parking area)	BASIN South-5 (Building #4 - Area South of James Place)
Any signs of oil sheens, foam, sludge, or rust precipitation?	None	None	None	None	None	None
Any signs of other contaminants at the storage locations or along storm water flow path?	No	None	None	MINIMAL TRACKING OF YARD WASTE FROM TRUCK AREA	None	None
Observe stormwater flow paths. Any waste or bulk storage in flow path?	No	No	No	No	No	No
Any litter or trash on ground:	MINIMAL TRASH FROM SURROUNDING FACILITIES	No	No	No	No	No
Other observations?	-	-	-	-	-	-

Inspected by:  (Signature)
JEFFREY L. WOODS (Printed Name)

QUARTERLY VISUAL STORMWATER INSPECTION

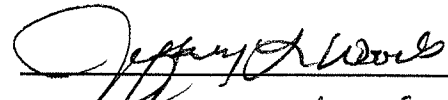
Instructions: Quarterly inspections should be conducted to document that the provisions of the SWPPP are being followed, and to identify areas needing improvement. The completed forms should be placed in Appendix B, and kept for at least 5 years.

Date: AUGUST 13, 2010

Time: 9:45 A

Weather Conditions: CLOUDY & RAIN

AREAS	BASIN North (Parking area, vegetated areas, building #3, outdoor storage, part of building #5)	BASIN South-1 (Part of building #2 & outdoor storage)	BASIN South-2 (Parts of buildings #1, #2, & #5, outdoor storage, parking area, & fueling area)	BASIN South-3 (Park of building #1, yard waste drop-off area, & parking area)	BASIN South-4 (Park of building #1 & parking area)	BASIN South-5 (Building #4 - Area South of James Place)
Any signs of oil sheens, foam, sludge, or rust precipitation?	None	None	None	None	None	None
Any signs of other contaminants at the storage locations or along storm water flow path?	None	None	None	MINIMAL GRASS CLIPPINGS TRACKED FROM BIW AREA	None	None
Observe stormwater flow paths. Any waste or bulk storage in flow path?	No	No	No	No	No	No
Any litter or trash on ground:	None	None	No	No	No	No
Other observations?	-	-	-	-	-	-

Inspected by:  (Signature)
JEFFREY L. WOODS (Printed Name)

QUARTERLY VISUAL STORMWATER INSPECTION

Instructions: Quarterly inspections should be conducted to document that the provisions of the SWPPP are being followed, and to identify areas needing improvement. The completed forms should be placed in Appendix B, and kept for at least 5 years.

Date: October 26, 2010

Time: 1:45 PM

Weather Conditions: Cloudy & Rain

AREAS	BASIN North (Parking area, vegetated areas, building #3, outdoor storage, part of building #5)	BASIN South-1 (Part of building #2 & outdoor storage)	BASIN South-2 (Parts of buildings #1, #2, & #5, outdoor storage, parking area, & fueling area)	BASIN South-3 (Park of building #1, yard waste drop-off area, & parking area)	BASIN South-4 (Park of building #1 & parking area)	BASIN South-5 (Building #4 - Area South of James Place)
Any signs of oil sheens, foam, sludge, or rust precipitation?	No	No	No	No	No	No
Any signs of other contaminants at the storage locations or along storm water flow path?	No	No	No	No	No	No
Observe stormwater flow paths. Any waste or bulk storage in flow path?	No	No	No	No	No	No
Any litter or trash on ground:	None	None	None	None	None	None
Other observations?	-	-	-	-	-	-

Inspected by: Jeffrey L. Woods (Signature)
JEFFREY L. WOODS (Printed Name)