



MUNICIPAL UTILITIES DEPARTMENT
 Stormwater Management Program
 (209) 937-8705

Stormwater Inspection Report for Industrial Facilities

Business Name: _____
 Facility Address: _____
 Mailing Address: _____
 Facility Contact and Title: _____
 Phone: _____
 Fax: _____

Inspection Date: _____
 2nd Inspection Date: _____
 3rd Inspection Date: _____

Weather at time of inspection: Sunny Cloudy Windy Drizzle Steady Rainfall

Part A - Administrative Evaluation: Is the facility within the County unincorporated area? Yes / No (circle)

	Yes	No	Deficient	↓ Check if Active BMP
1				Are all Facility activities conducted indoors and/or under cover?
				Does the facility have outdoor processing / vehicle maintenance and repair? If yes - (circle) If yes, are these activities conducted under cover or within secondary spill containment? If yes - (circle)
				Is there a SWPPP on file at the facility? If yes - provide date of last review:
2				Is there a site map on file in SWPPP?
				If yes, are storm water monitoring locations clearly marked?
				Is the facility up to date with monthly and quarterly inspections? Is documentation present on site?
3				Is the most recent annual report on site?
4				Employee training on pollution (spill) prevention, storm water issues, and good housekeeping measures? If yes (circle) and provide last training date (if applicable):
5				Spill prevention and control procedures in place?
6				Are there water (recirculation / reclamation system) treatment units in operation at the facility? (circle)
				If yes, can waste (particulates / dust / condensation / wastewater) enter the storm water system? (circle)
				If present, does any used water (cooling tower blowdown, boiler blowdown, etc.) discharge to the storm water system?

Part B - Indoor Evaluation:

	Yes	No	Deficient	↓ Check if Active BMP
7				Does the facility have interior floor drains?
				If yes, are floor drains connected to the sanitary sewer / septic system / detention basin? (circle) Are the drains maintained/cleaned regularly?

Part C - Outdoor Evaluation:

	Yes	No	Deficient	↓ Check if Active BMP
8				Is there visual evidence of materials spills at this facility? If yes - circle location and type: processing area / loading & unloading areas / storage area / vehicle maintenance & repair / parking areas / driveways/other active spills (note type) /mobilized particulates/cleaning materials/staining/oil & grease/automotive fluids/fueling spills/soil/other
				Are catch basins, gutters, storm drain inlets, detention basins, and surfaces free of debris / trash / dirt? If no, indicate area and type (circle)
9				Regular cleaning of storm drainage system conducted (pavement sweeping / regular litter removal)? If yes - (circle)
				Does pavement sweeping / pressure washing occur on-site? If yes - (circle) Are drains protected? And is water collected disposed of properly?
				Are storm drains stenciled or labeled? (i.e. " No Dumping - Flows to Delta") For stencil kit call 937-5143
10				Can dirt /debris from vehicle traffic/landscape irrigation/building cleaning enter storm drains? If yes - (circle)
				Are sediment filters in/around storm drain inlets?
11				Are trash receptacles covered and leak resistant?
12				If present, does fueling area design minimize storm water exposure? If yes, circle method: Covered/perimeter drain/ pavement sloped to containment sump / UST with spill and overflow protection / double-walled AST with secondary containment
13				Does the site have designated covered / exposed wash area? If yes - (circle)
				If yes, is discharge directed to a containment sump or portable containment & vacuum collection? (circle)
14				Materials stored on paved or impervious surfaces / under fixed or temporary cover / within containment berms? If yes - (circle)
15				If there are outdoor construction activities at the facility, are BMPs in place? If yes, circle type: soil erosion control / sediment filters / covered materials / secondary containment / sand bags / litter removal / trash containment

Part D - Additional BMPs:

	Yes	No	Deficient	
16				Process wastes piped directly to sewer pretreatment system?
17				Recycle greases, used oil, oil filters, antifreeze, cleaning solutions, automotive batteries, hydraulic and transmission fluids? (circle)
18				Does the business have a mercury management, reduction, and elimination plan?
19				Are mercury-containing devices present which show evidence of leakage, spillage, or damage that could cause leaks?

Correction Noticed Issued: Yes NO Signature of Facility Representative: _____

Violation to be corrected by: _____ Inspector's Name: _____

Outreach Materials Distributed: YES NO

COMMENTS: