Virginia State University

MS-4 Permit: VAR040119

July 1, 2014 - June 30, 2015 Annual Report

Prepared for

Virginia State University
Capital Outlay & Facilities Management
PO Box 9414
Virginia State University, VA 23806

October 1, 2015

Prepared by: Timmons Group
1001 Boulders Parkway, Suite 300
Richmond, VA 23225
(804) 200-6500

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1.0 Background Information

(1) Name and permit number of the program; (2) Annual report permit year; (3) Modifications to any operator's department's roles and responsibilities; (4) Number of new MS4 outfalls and associated acreage by HUC added during the permit year; (5) Signed certification in accordance with 9VAC25-870-370.

- Name and permit number of the program submitting the annual report.
  Virginia State University
  Permit # VAR040119

- The annual report permit year.
  This serves as the annual report for permit year two of the 2013-2018 General Permit term. This annual report covers a time period from approximately July 2014 – June 2015.

- Modifications to any operator's department's roles and responsibilities.
  The operator's roles and responsibilities have been provided in the Program Plan and are not considered to be modified for the purposes of this report.

- Number of new MS4 outfalls and associated acreage by HUC added during the permit year
  No new outfalls were added during the permit year. One outfall was removed and the associated discharge was rerouted to the next outfall in the system.

- Signed certification in accordance with 9VAC25-870-370
  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 that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Jonathan Taylor
Director for Capital Outlay

9-30-15
Date

For questions about the annual report submittal or VSU's MS4 Program Plan, please contact:

Jonathan Taylor
Director for Capital Outlay
Virginia State University
Physical Plant Building
2916 Myster Macklin Street
PO Box 9414, Suite 25
Virginia State University, VA 23806
Tel: (804) 504-7500
jataylor@vsu.edu

2.0 Status of Permit Condition Compliance

The status of compliance with permit conditions, an assessment of the appropriateness of the identified best management practices and progress towards achieving the identified measurable goals for each of the minimum control measures.

2.1. Assessment of BMP Appropriateness/Self Audit

The Program Plan elements and BMPs are considered to be appropriate based on the 2013-2018 General Permit requirements.

2.2. Measurable Goals Progress

MCM 1: Public Education and Outreach

Annual Reporting Requirement 1: Provide a list of the education and outreach activities conducted during the reporting period for each high-priority water quality issue, the estimated number of people reached, and an estimated percentage of the target audience or audiences that will be reached.

VSU conducted the following education and outreach activities for each of the three high-priority water quality issues described in the 2013-2018 Program Plan:

High-Priority Water Quality Issue	Education/Outreach Activity	Materials Used	Distribution Methods	Estimated Population Reached	Estimated % of Target Audience that will be Reached
Poor Quality Receiving Waters	Email sent to all firms with active developments on campus at the time	Annual Specifications for Erosion and Sediment Control and Stormwater Management; Campus Design Guidelines	Availability on website, plus email distribution to all A/E firms performing planning and designs on campus	Three firms	100%
Student and Faculty Stormwater Education and Outreach	Email sent to all students, staff and faculty	Stormwater fact sheets and/or general stormwater education presentations	Email stormwater fact sheets and/or conduct general stormwater presentations at a minimum of once per year	6,318 students, staff, and faculty	100%
Dumpster and Litter Management on campus	Email sent to all students, staff, and faculty	Dumpster best practices fact sheet	Email fact sheets on an annual basis.	6,318 students, staff, and faculty	100%

VSU elected to distribute the Stormwater Fact Sheet and Dumpster Fact Sheet to all students and faculty via email in lieu of at campus Town Hall Meetings and during staff training sessions in order to reach a much wider audience.

Annual Reporting Requirement 2: A list of the education and outreach activities that will be conducted during the next reporting period for each high-priority water quality issue, the estimated number of people that will be reached, and an estimated percentage of the target audience or audiences that will be reached.

Provided in the 2013-2018 Program Plan.

MCM 2: Public Involvement and Participation

Annual Reporting Requirement 1: Provide a web link to the MS4 Program Plan and Annual Report

The MS4 Program Plan and Annual Report are available for public review at the following website: http://www.vsu.edu/about/administrative-offices/admin-finance/capital-outlay-and-facilities/capital-outlay/programs-resources-procedures.php.

Annual Reporting Requirement 2: Documentation of compliance with the public participation requirements.

VSU identified and participated in the following four local events/activities provided in the 2013-2018 Program Plan to address public involvement with stormwater and environmental activities:

1. *Promote and support Ft. Lee's Annual Earth Day Event. This year VSU planted and dedicated a tree in Dr. Martin Luther King's honor in celebration of Arbor Day in lieu of supporting the Ft. Lee Annual Earth Day Event (refer to MCM2 for documentation of this event).*

2. *Seek Tree Campus USA Program Designation. VSU formed a joint Tree Campus USA and Stormwater Committee and has received the Tree Campus USA designation. The committee meets on a regular basis and works to maintain this designation for the University. Refer to MCM 2 for documentation of this activity.*

3. *Seek partnership opportunities for public involvement and participation with other local MS4 programs. VSU partnered with Chesterfield County to install storm drain placards on all storm drain inlets on campus. This is a multi-year project. Refer to MCM2 for documentation of this activity.*

4. *Seek classroom guest speakers that focus on stormwater. Timmons Group gave presentations about the University's MS4 program and stormwater management on March 11th and 16th to two VSU Environmental Science Labs. Refer to MCM2 for documentation of this activity.*

MCM3: Illicit Discharge Detection and Elimination

Annual Reporting Requirement 1: A list of any written notifications of physical interconnection given by the operator to other MS4s.

During the 2014 annual outfall IDDE screenings it was discovered that the VSU MS4 is interconnected with VDOT's MS4 along Chesterfield Avenue. A copy of the notification letter sent to VDOT was included in Appendix MCM3 of the 2013-2014 Annual Report.

No additional physical interconnections between the VSU MS4 system and adjacent MS4 systems have been identified during this reporting period and as such no notifications were provided during this reporting period.

Annual Reporting Requirement 2: The total number of outfalls screened during the reporting period, the screening results, and detail of any follow-up actions necessitated by the screening results.

21 outfalls were screened during the reporting period resulting in no illicit discharge follow-up actions. Refer to Appendix MCM 3 for outfall screening results. Note, one outfall was removed from the system as noted earlier in the report, resulting in one less screening this year.

Annual Reporting Requirement 3: A summary of each investigation conducted by the operator of any suspected illicit discharge. The summary must include: (i) the date that the suspected discharge was observed, reported, or both; (ii) how the investigation was resolved, including any follow-up, and (iii) resolution of the investigation and the date the investigation was closed.

No illicit discharges were reported during the reporting period.

Annual Reporting Requirement 4: Outfall mapping & Database Table

The required outfall mapping and database table are provided in the Program Plan. Note that the Outfall Map has been updated to include the newly constructed Athletic Truck Line.

MCM 4: Construction Site Stormwater Runoff Control

Annual Reporting Requirement 1: Total number of regulated land-disturbing activities

Six regulated land disturbing activities occurred within the reporting period. Refer to Appendix MCM 4 for documentation.

Annual Reporting Requirement 2: Total number of acres disturbed.

Approximately 53.92 acres of area were disturbed for this reporting period. Refer to Appendix MCM 4 for documentation.

Annual Reporting Requirement 3: Total number of inspections conducted

Approximately 27 inspections were conducted within this reporting period. 19 were performed by University staff and 8 were performed by outside contractors. The University is working to improve on the frequency and consistency of the inspections. Refer to Appendix MCM 4 for representative inspection report documentation.

Annual Reporting Requirement 4: A summary of the enforcement actions taken, including the total number and type of enforcement actions taken during the reporting period.

No enforcement actions were taken beyond typical compliance requirements provided on erosion and sediment control inspection forms.

MCM5: Post Construction Stormwater Management in New Development and Development on Prior Developed Lands

Annual Reporting Requirement 1: The operator shall maintain an updated electronic database of all known operator-owned and privately-owned stormwater management facilities that discharge into the MS4.

The required stormwater management facility database is provided in the Program Plan.

Annual Reporting Requirement 2: The operator shall submit an electronic database or spreadsheet of all stormwater management facilities brought online during each reporting year with the appropriate annual report.

No new stormwater management facilities were brought online during the reporting period. The most up to date stormwater management facility database is provided in the Program Plan. Three facilities that had previously been combined in the database were separated, resulting in the apparent addition of three facilities.

Annual Reporting Requirement 3: VSU provides post-construction inspections and maintenance of operator-owned post-construction stormwater management facilities in accordance with the Annual Standards and Specifications for Erosion and Sediment Control and Stormwater Management provided in Appendix MCM 4 of the Program Plan.

Annual facility inspection reports are provided in Appendix MCM 5 for documentation purposes.

MCM 6: Pollution Prevention/Good Housekeeping for Municipal Operations

Annual Reporting Requirement 1: A summary report on the development and implementation of the daily operational procedures

Daily operational procedures have been developed and are included in the Program Plan.

Annual Reporting Requirement 2: A summary report on the development and implementation of the required SWPPPs .

Locations and facilities requiring SWPPPs have been identified in the Program Plan as required by the timeframes in the 2013-2018 General Permit. SWPPPs will be prepared, planned to be developed, and implemented by permit year 4 as required by the 2013-2018 General Permit.

Annual Reporting Requirement 3: A summary report on the development and implementation of the turf and landscape nutrient management plans that includes:

1. The total acreage of lands where turf and landscape nutrient management plans are required

Turf and landscape nutrient management plans are required by the MS4 permit on approximately 96 acres of campus.

2. The acreage of lands upon which turf and landscape nutrient management plans have been implemented

A Nutrient Management Plan has been developed for approximately 96 acres of campus and is provided in the Program Plan.

A summary report on the required training, including a list of training events, the training date, the number of employees attending training and the objective of the training

Documentation of training event completed during the 2014-2015 reporting period is included in Appendix MCM6.

3.0 Results of Collected Data

Results of information collected and analyzed, including monitoring data, if any, during the reporting period.

Virginia State University was not required to collect and analyze any formal monitoring data during this reporting period.

4.0 Future Stormwater Activities

A summary of the stormwater activities the operator plans to undertake during the next reporting cycle.

- *Implement Chesapeake Bay TMDL Action Plan*
- *Implement Standard Operating Procedures*
- *Implement Training Program as developed in the 2013-2018 Program Plan*
- *Implement Public Education and Outreach Program as proposed in the 2013-2018 Program Plan*

- *Implement Public Involvement and Participation Program as identified in the 2013-2018 Program Plan*
- *Implement IDDE Program as identified in the 2013-2018 Program Plan*
- *Implement Construction Site Stormwater Runoff Control Program as identified in the 2013-2018 Program Plan*
- *Implement the Post-Construction Stormwater Management Program as identified in the 2013-2018 Program Plan*
- *Implement the Pollution Prevention/Good Housekeeping for Municipal Operations Program as identified in the 2013-2018 Program Plan*

5.0 Changes in BMPs and Minimum Control Measures

A change in any identified best management practices or measurable goals for any of the minimum control measures including steps taken to address deficiencies.

5.1. Changes in BMPs

No existing BMPs were changed during the reporting period. MCM 6 has been updated to reflect nutrient management plans and Standard Operating Procedures that were prepared during the reporting period.

5.2. Changes in Measurable Goals

The following measureable goals were changed during the reporting period as described below. An updated version of the program plan that includes these changes has been provided for review and reference.

MCM 1 – The number of A/E firms performing planning and designs on campus decreased during this annual reporting year and the Program Plan was updated to reflect that. VSU still intends to reach 100% of active firms once each year.

VSU elected to distribute educational materials to all faculty and staff via email instead of only at University Town Hall meetings and staff training sessions in order to ensure delivery to a wider audience. This increased the target audience population size from approximately 50 students and 100 staff to approximately 5,000 students and 1,200 staff.

MCM 5 – The documentation protocol for BMP inspections was updated to allow for flexibility in the type of documentation acceptable for record keeping purposes.

6.0 Government Reliance for Permit Obligations

Notice that the operator is relying on another government entity to satisfy some of the permit obligations (if applicable).

Not applicable at this time.

7.0 Section II C Program Status

The approval status of any programs pursuant to Section II C (if appropriate), or the progress towards achieving full approval of these programs

Not applicable at this time.

8.0 TMDL Special Conditions Contained in Section I

Information required for any applicable TMDL special condition contained in Section I

- *VSU has not been assigned any Waste Load Allocations in any TMDLs as of the preparation of this report.*
- *The Program Plan has been updated to reflect the special condition requirements for the Chesapeake Bay TMDL. A Chesapeake Bay TMDL Action Plan has been prepared and submitted under separate cover.*

Appendix MCM 1

Matthew Webb

From: Jonathan A. Taylor <jataylor@vsu.edu>
Sent: Tuesday, June 09, 2015 2:25 PM
To: Ken Pope; Carrie Langelotti; Mitch Rowland; James Peace; William J. Pipp
Cc: Amelia Wehunt; Jane S. Harris; Gilbert Hanzlik; Debra C. Albert
Subject: VSU Annual Standards and Specifications for Erosion and Sediment Control & Stormwater Management

To all of our Term Contract holders,

VSU has developed and implemented our own Annual Standards and Specifications for Erosion and Sediment Control & Stormwater Management. They are located on the VSU website for your use and for distribution to your Consultants at http://www.vsu.edu/about/administrative-offices/admin-finance/capital-outlay-and-facilities/programs-resources-procedures.php. These standards are updated on an annual basis, so please confirm that you are using the correct version at the outset of your projects.

These standards shall apply to all land disturbance projects exceeding 2,500 square feet of disturbance unless otherwise exempt. Please familiarize yourself with these guidelines. If you have any questions or suggestions, please email me at jataylor@vsu.edu .

Thanks You

Jonathan A Taylor
Virginia State University
Director of Capital Outlay
Physical Plant Building
2916 Myster Macklin Street
PO Box 9414, Suite 25
Virginia State University, VA 23806
804 504 7500 office
804 524 5383 fax
jataylor@vsu.edu

Matthew Webb

From: Jane S. Harris <jsharris@vsu.edu>
Sent: Friday, March 27, 2015 1:18 PM
To: Faculty; Staff; All Students
Cc: Amelia Wehunt
Subject: Environmental Stewardship at VSU
Attachments: Stormwater Fact Sheet.pdf

Do you know that Virginia State University owns and operates a network of storm water inlets, pipes, ditches, and storm water management ponds known as a Municipal Separate Storm Sewer System (MS4)? The attached fact sheet tells you a bit more about storm water management and what you can do to make sure that campus is safe and clean for today and tomorrow's VSU community!

Jane Harris
Virginia State University
AVP for Capital Outlay and Facilities
Physical Plant Building
2916 Myster Macklin Street
Virginia State University, VA 23806
(W) (804) 524-6239
(C) (804) 218-3225
(F) (804) 524-5383
jsharris@vsu.edu

MINIMIZING STORMWATER POLLUTION

Stormwater is water from rain or melting snow that does not soak into the ground but runs off into waterways. It flows from rooftops, bare soil and paved areas and lawns. It picks up a variety of contaminants (pet waste, fertilizers, oil, grease) along the way. These enter our lakes, streams, wetland and rivers and can harm fish, wildlife, vegetation. It can also foul your drinking water.

PRACTICES TO REDUCE STORMWATER POLLUTION INCLUDE CONTAINING AND COVERING GARBAGE, WASTE MATERIALS, AND DEBRIS. EVEN THE SIMPLE PRACTICE OF KEEPING A TRASH CAN LID CLOSED CAN BE A VERY EFFECTIVE POLLUTION PREVENTION MEASURE. OTHER EASY WAYS TO PREVENT STORMWATER POLLUTION INCLUDE: WASHING YOUR CAR OVER LAWN OR GRAVEL; USING LAWN CHEMICALS SPARINGLY, AND CLEANING UP PET WASTE.

To report illegal dumping on the VSU campus, call (804) 524-5451.

VIRGINIA STATE

www.vsu.edu

Matthew Webb

From: Jane S. Harris <jsharris@vsu.edu>
Sent: Thursday, April 09, 2015 11:23 PM
To: All Students; Faculty; Staff
Cc: Amelia Wehunt
Subject: Environmental Stewardship at VSU
Attachments: Dumpster Fact Sheet.pdf

As the semester draws to a close and some of us prepare to leave campus, please be mindful that our actions can have a direct impact on the rivers and streams we share. Using Best Management Practices when discarding trash will help prevent pollution from entering drains and into our rivers and streams. Please read the attached fact sheet to see how you can help keep our campus and the Appomattox River clean for generations of Trojans to come.

Jane Harris
Virginia State University
AVP for Capital Outlay and Facilities
Physical Plant Building
2916 Myster Macklin Street
Virginia State University, VA 23806
(W) (804) 524-6239
(C) (804) 218-3225
(F) (804) 524-5383
jsharris@vsu.edu

TRASH BEST MANAGEMENT PRACTICES

Don't Let Trash End Up in Our Rivers and Streams

Keep dumpsters, trash cans and recycling bins covered, except when filling or emptying. Schedule pickup frequency to keep trash from holding the cover open. Open lids allow contact with stormwater, which dissolves and transports contaminants into the stormwater system. Open lids also invite pests to spread trash around.

Do not put liquids or greases in the trash containers. They should go down the sanitary sewer or be discarded in a grease barrel. Liquids may be accepted by the local sanitary sewer district, check prior to discharging any liquid into the sewer line.

Check that the dumpsters or trash cans are in good condition, with no holes or accumulation of grime. Trash containers should be leak-free. When necessary, call the sanitation company to replace or clean the containers.

Regularly inspect the trash enclosure and general area for problems such as trash not in the container and accumulation of grease or food on the ground. Clean the trash enclosure as needed to remove any accumulations of grime and/or general trash.

Clean trash cans in a designated area with a connection to the sanitary sewer such as mop sink or floor drain. Do not use a drain without knowing whether it flows to the sanitation sewer, storm drain or self-contained internal sump. Confirm before using drains to ensure proper disposal. Never discharge wash-water to storm drains or offsite.

Designate an area for trash collection away from storm drains. This allows problems at the trash container to be corrected before reaching the storm drain or flow offsite.

All of our actions within our watersheds have a direct impact on the rivers and streams we share.

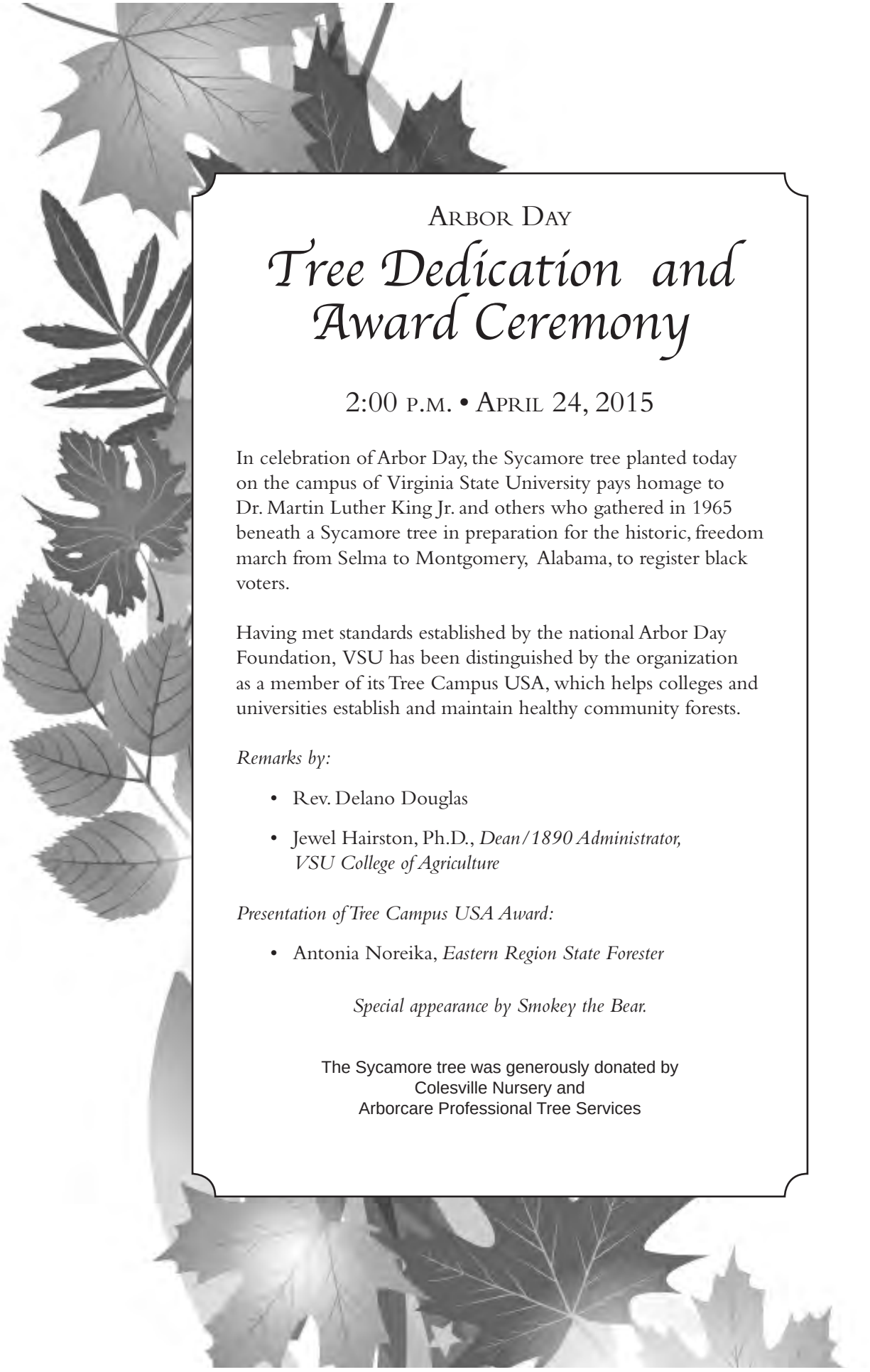
The Best Management Practices shown at left help prevent pollution from going down the drains and into our rivers and streams.

To report illegal dumping on the VSU campus, call (804) 524-5451.

VIRGINIA STATE

www.vsu.edu

Appendix MCM 2



ARBOR DAY

Tree Dedication and Award Ceremony

2:00 P.M. • APRIL 24, 2015

In celebration of Arbor Day, the Sycamore tree planted today on the campus of Virginia State University pays homage to Dr. Martin Luther King Jr. and others who gathered in 1965 beneath a Sycamore tree in preparation for the historic, freedom march from Selma to Montgomery, Alabama, to register black voters.

Having met standards established by the national Arbor Day Foundation, VSU has been distinguished by the organization as a member of its Tree Campus USA, which helps colleges and universities establish and maintain healthy community forests.

Remarks by:

- Rev. Delano Douglas
- Jewel Hairston, Ph.D., *Dean/1890 Administrator, VSU College of Agriculture*

Presentation of Tree Campus USA Award:

- Antonia Noreika, *Eastern Region State Forester*

Special appearance by Smokey the Bear.

The Sycamore tree was generously donated by
Colesville Nursery and
Arborcare Professional Tree Services

Matthew Webb

From: Amelia Wehunt
Sent: Wednesday, August 26, 2015 1:42 PM
To: Matthew Webb
Subject: FW: Tree Dedication and Award Ceremony 2PM Friday April 24
Attachments: ArborDayDedication_April24.pdf; ATT00001.htm

Follow Up Flag: Follow up
Flag Status: Flagged

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
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LinkedIn: www.linkedin.com/in/ameliawehunt
Your Vision Achieved Through Ours

To send me files greater than 20MB **click here.**

From: Jane S. Harris [mailto:jsharris@vsu.edu]
Sent: Sunday, April 26, 2015 3:28 PM
To: Amelia Wehunt
Subject: Fwd: Tree Dedication and Award Ceremony 2PM Friday April 24

Didn't know whether you received this, but thought you should know it took place.

Sent from my iPad

Begin forwarded message:

> **From:** Announcements <announcements@vsu.edu>
> **Date:** April 23, 2015 12:07:37 PM EDT
> **To:** Faculty <Faculty@vsu.edu>, Staff <Staff@vsu.edu>
> **Subject: Tree Dedication and Award Ceremony 2PM Friday April 24**
>
> ARBOR DAY CELEBRATION
>
> Tree Dedication and Award Ceremony
>
> 2:00 p.m. • April 24, 2015
> Martin Luther King Drive
> The event will take place near the parking area (Lot 30)

In celebration of Arbor Day, the Sycamore tree to be planted on the campus of Virginia State University pays homage to Dr. Martin Luther King Jr. and others who gathered in 1965 beneath a Sycamore tree in preparation for the historic, freedom march from Selma to Montgomery, Alabama, to register black voters.

Having met standards established by the national Arbor Day Foundation, VSU has been distinguished by the organization as a member of its Tree Campus USA, which helps colleges and universities establish and maintain healthy community forests.

Remarks by:

- Rev. Delano Douglas
- Jewel Hairston, Ph.D., *Dean/1890 Administrator, VSU College of Agriculture*

Presentation of Tree Campus USA Award:

- Antonia Noreika, *Eastern Region State Forester*

Special appearance by Smokey the Bear.

Lesha L. Berkel
Graphic Designer | Marketing & Communications
Virginia State University | College of Agriculture

804-524-2788 (office)
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www.agriculture.vsu.edu

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the use, distribution, disclosure or reproduction of this email (or any part of its contents) by anyone other than the intended recipient(s).

No representation is made that this email and any attachments are free of viruses. Virus scanning is recommended and is the responsibility of the recipient.”

Matthew Webb

From: Joel Koci <jkoci@vsu.edu>
Sent: Thursday, March 05, 2015 11:37 AM
To: Amelia Wehunt
Cc: Marcus Comer
Subject: your request
Attachments: TreeCampusUSAApplicationSummary (1).pdf

Ms. Wehunt,
Per your request for a copy of the Tree Campus application, (from a while ago) here it is.
I would love to discuss with you the possibility of doing some research on the new plantings that will be going in here on campus. This is the perfect opportunity to carry out some research on state of the art installation of plant material in a construction site, and spec writing for the installation. Thanks very much.
JKoci

General Information

Your Contact Information

- **College or University Name:** Virginia State University
- **Name:** Joel Koci
- **Title:** Urban Forestry Exten. Assoc
- **Address:**
  - 1 Hayden street
  - Petersburg VA 23806
- **Phone:** 804-524-5758

Communications Office Contact

- **Name:** Michell Olgers
- **Title:** Director of Margeting
- **Phone:** 804-524-6964
- **Email:** molgers@vsu.edu

President/Chancellor's Office

- **Name:** Pamela Hammond
- **Title:** President VSU
- **Address:**
  - 1 Hayden ave. Virginia Hall
  - Petersburg VA 23806
- **Email:** phamond@vsu.edu

Referrer

- **How did you hear about the Tree Campus USA program?:**
  - mid atlantic chapter of I S A

Recognition Event Date

- **Recognition Event:** April 24, 2014

Standard 1

Committee Dates

- **Date Committee Was Established:** Mar 13, 2014
- **Meeting Dates for Application Year:**
  - Dec 11, 2014
  - Jun 19, 2014
  - Mar 13, 2014

Committee Members

- **Student:**
  - Angela Baker, Grad student andelabaker@live.com
- **Faculty:**
  - Christopher Catanzaro, Ag dept. Head ccatanzaro@vsu.edu
- **Facility:**
  - Jane Harris, Facilities Mangmt. jsharris@vsu.edu
- **Community:**
  - Richard Reuse, VDOF Cty. Forester richard.reuse@dof.virginia.gov
  - Heather Barrar, resident barrah@chesterfield.gov

Standard 2

Campus Tree Care Plan Establishment

- **Date the Campus Tree Care Plan Was Established:** Dec 12, 2014
- **Campus Tree Care Plan:**
  - *file* Campus Tree Care Plan 1
- **Status of Plan Goals & Tagets**

Standard 3

Expenditures Calculation

- **Tree Planting and Initial Care Costs:** $50000
- **Campus Tree Management Costs:** $11700
- **Volunteer Time from Students and Civic Organizations:** 96
- **Other Costs:** $0
- **Other Cost Description:** 0
- **Total Calculated Costs:** $63864.8

Additional Campus Details

- **Number of Trees Planted:** 48
- **Number of Trees Removed:** 32
- **Reason for Tree Removal:** Road widening and new building construction.
- **Number of Trees Pruned:** 80
- **Tree Canopy Cover Percent:** 15%
- **Campus Population:** 5,045

Standard 4

Observance Details

- **Date of the Event:** Apr 25, 2014
- **Short Summary of the Event:**

  Ettrick Elementary had its first ever Arborday cellabration on 4/25/14. One "Amelanchier aborea" Serviceberry ,donated by the Virginia Dept. of Forestry, was planted with the help of

second graders from Ettrick Elem. Along with the serviceberry 6 seedling Oaks were installed in the parking area.

- **Documents:**
  - *file* Arbor Day Observance 1

Standard 5

Service Learning Project Details

- **Date of Service Learning Project:** Sep 26, 2014
- **Short Summary of the Event:**

  The Community Outreach Board sponsored the second annual Appomattox River clean up.This scenic river runs adjacent to campus and is an ecotourism draw in our area. The goal was to remove litter and trash from the bank area and clear the paths of fallen debris. The volunters enjoyed the work and gain an appreciation of the once major traveled and historic waterway.

- **Number of Students Involved:** 24
- *file* Service Learning Project 1

Matthew Webb

From: Joel Koci <jkoci@vsu.edu>
Sent: Wednesday, March 11, 2015 9:18 AM
To: Marcus Comer; Jewel E. Hairston; Jane S. Harris; William J. Pipp
Cc: Christopher J. Catanzaro; Michelle Olgers; Amelia Wehunt; pwiseman@vt.edu; Paula H. McCapes; Reuse, Richard D. (DOF) (Richard.Reuse@dof.virginia.gov); kristina saltsman (trees4me@me.com)
Subject: Tree campus

Great News,
I received word today that we earned Tree Campus USA from the National Arborday Foundation. They are getting the signage to me so we can have it when we commemorate the MLK tree. We need to find a suitable site for the MLK tree . Thanks

Joel Koci

Urban Forestry
Extension Associate
Virginia State University

"Everything in Nature is interdependent . . . everything! I have to emphasize this again and again."
- Rudolph Steiner

Matthew Webb

From: Amelia Wehunt
Sent: Wednesday, August 26, 2015 1:41 PM
To: Matthew Webb
Subject: FW: Chesterfield Stormwater Education Contact

Follow Up Flag: Follow up
Flag Status: Flagged

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
Your Vision Achieved Through Ours

To send me files greater than 20MB **click here.**

From: Jonathan A. Taylor [mailto:jataylor@vsu.edu]
Sent: Wednesday, March 04, 2015 10:14 AM
To: Field, Lorne; Amelia Wehunt; Barrar, Heather
Cc: Aislinn Creel; Jason S. MacDonald; George W. Bowles
Subject: RE: Chesterfield Stormwater Education Contact

Thanks Lorne

I will have Bubba Bowles from VSU pick up the markers.

Jonathan

From: Field, Lorne [mailto:FieldL@chesterfield.gov]
Sent: Wednesday, March 04, 2015 9:56 AM
To: Amelia Wehunt; Barrar, Heather
Cc: Aislinn Creel; Jonathan A. Taylor; Jason S. MacDonald
Subject: RE: Chesterfield Stormwater Education Contact

Hi Amelia,

I can leave them at the front desk of my department for someone to pick up if you want them soon.

Community Development Building
9800 Government Center Parkway
Environmental Engineering, third floor
Chesterfield, VA 23832

Otherwise I can drop them off at the college sometime next week.

Lorne

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Tuesday, March 03, 2015 11:38 AM
To: Field, Lorne; Barrar, Heather
Cc: Aislinn Creel; Jonathan A. Taylor; Jason S. MacDonald (jmacdonald@vsu.edu)
Subject: RE: Chesterfield Stormwater Education Contact

Thanks Lorne!

Chesterfield County should contact the VSU work order desk at 804 524 5451. That number is monitored 24 hrs. / day. and they will contact the appropriate staff person.

What makes sense as the next step to obtain the markers?

Amelia

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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From: Field, Lorne [mailto:FieldL@chesterfield.gov]
Sent: Friday, February 13, 2015 5:11 PM
To: Amelia Wehunt; Barrar, Heather
Cc: Aislinn Creel; Jonathan A. Taylor; Jason S. MacDonald (jmacdonald@vsu.edu)
Subject: RE: Chesterfield Stormwater Education Contact

Ameila,

We would be glad to provide the markers.

However, our markers display our illicit discharge hotline number. Since VSU is an MS4 authority we would have no enforcement jurisdiction if there were a spill on campus. If we receive a call on our hotline we would have to turn it over to the proper VSU contact. Can we get the contact information for the personnel that handle enforcement/spill response at VSU in case there is an incident?

Thanks!

Lorne Field
Chesterfield County Environmental Engineering

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Friday, February 13, 2015 3:55 PM
To: Field, Lorne; Barrar, Heather

Cc: Aislinn Creel; Jonathan A. Taylor; Jason S. MacDonald (jmacdonald@vsu.edu)
Subject: RE: Chesterfield Stormwater Education Contact

Hi Heather and Lorne,

I wanted to reach back out to you all regarding the storm drain markers for VSU's inlets and storm structures. There are roughly 500 structures on campus. Is Chesterfield still willing to provide the markers in furtherance of both MS4 Programs?

I have included Jonathan Taylor and Jason MacDonald from VSU's program on the email for reference. Please let us know what the next steps are if we proceed.

Thank you and have a great weekend!

Amelia

Amelia Wehunt, PE
Project Manager

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From: Amelia Wehunt
Sent: Thursday, May 08, 2014 12:41 PM
To: Field, Lorne; 'Barrar, Heather'
Cc: Aislinn Creel
Subject: RE: Chesterfield Stormwater Education Contact

Lorne and Heather,

Thank you so much for your follow up regarding the VSU MS4 program. Aislinn and I are in the process of working through follow up tasks with VSU and will be in touch regarding next steps.

Thanks again,

Amelia

Amelia Wehunt, PE
Project Manager

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LinkedIn: www.linkedin.com/in/ameliawehunt
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From: Barrar, Heather [mailto:BarrarH@chesterfield.gov]
Sent: Wednesday, May 07, 2014 3:54 PM
To: 'jataylor@vsu.edu'; Aislinn Creel; Field, Lorne; 'ghanzlik@vsu.edu'
Cc: 'Gregory E. Frey'; Amelia Wehunt
Subject: Chesterfield Stormwater Education Contact

Jonathan, Gil & Aislinn,

As promised, I'm connecting you with Lorne Field, the Environmental Outreach & Education Specialist who works under the county MS4 permit. He can work with you on storm drain marking, illicit discharge information and other programming that we discussed. Lorne would also be interested in connecting with the professors who are doing water quality testing with their students, as was mentioned yesterday. I've also attached a photo of the storm drain marking process as requested by Jonathan.

Please let me know if you need additional contacts – GIS was mentioned. Also, we've implemented a successful new waste contract and we separate food, recyclables and paper in the office – let me know if you'd like more information on that. I'm assisting with the Ettrick VSU Plan, so I'm also very interested in the stormwater study that Timmons is conducting for the rest of the watershed.

Also, I was just asked to serve on a VSU bicycle committee, so maybe I'll work with some of you on that committee as well!

Take care,

Heather

Heather Barrar |Senior Planner

Chesterfield County Planning Department
9800 Government Center Parkway| Chesterfield, Virginia 23832-0040

Phone: 804.748.1778 | Fax: 804.717.6295 | Email: barrarh@chesterfield.gov
www.Chesterfield.gov

Matthew Webb

From: Glenn F. Chappell <gchappell@vsu.edu>
Sent: Thursday, March 19, 2015 11:34 AM
To: Amelia Wehunt
Subject: RE: Stormwater Classroom Guest Speaker Opportunity

Mrs. Wehunt,

I do appreciate you speaking to my two Environmental Science Labs about stormwater management over the past couple of weeks. The topic compliments many of the concepts they are learning in the class and allows them to observe the practices you mentioned as they travel around campus. Between the two labs, you opened the eyes of 37 student about the strategies that must be utilized to manage runoff in a way to protect our environment and health. Thanks you so much for your time and I look forward to utilizing your expertise in future classes if you have the time. Glenn

---

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Tuesday, March 03, 2015 11:44 AM
To: Glenn F. Chappell
Cc: Jonathan A. Taylor; Jason S. MacDonald
Subject: RE: Stormwater Classroom Guest Speaker Opportunity

Yes, I can come on March 11th and 16th at 2:40pm. What room is it in the Agricultural engineering shop?

I will have the PowerPoint presentation. I can bring my laptop and/or a USB drive with the presentation. Is there a projector and screen available in your classroom? I can bring these also if needed, just let me know what is available in your room.

Looking forward to it!

Amelia

Amelia Wehunt, PE
Project Manager

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1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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From: Glenn F. Chappell [mailto:gchappell@vsu.edu]
Sent: Tuesday, March 03, 2015 11:35 AM
To: Amelia Wehunt
Subject: RE: Stormwater Classroom Guest Speaker Opportunity

Would you be available March 16 and March 11th at 2:40 p.m. I have two environmental science labs that last 2 hrs each. What I am thinking is about a 45 minute presentation and then I will give them the questions either in lab or make it an assignment for them to complete by the next lab period. We have class in the Agricultural engineering shop located on the southeast side of campus near the physical plant administration building. If these dates work please let

me know what equipment you will need for the class. Thanks for your assistance and I am looking forward to hearing the information myself. Glenn

---

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Monday, February 16, 2015 10:02 AM
To: Glenn F. Chappell
Cc: Jonathan A. Taylor; Jason S. MacDonald
Subject: RE: Stormwater Classroom Guest Speaker Opportunity

Glenn,

I have uploaded a copy of the presentation and some questions here: Click to Retrieve File(s) . If the link is not clickable, copy and paste the following URL into your browser: https://www.sendthisfile.com/LW6Ol92VGc6ciJ3DsiZHa9da.

Please take a look and let me know if you want me to add or remove any content. Please also let me know what day/time you prefer.

Thanks so much! Looking forward to it.

Amelia

Amelia Wehunt, PE
Project Manager
TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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-----Original Message-----
From: Glenn F. Chappell [mailto:gchappell@vsu.edu]
Sent: Friday, February 13, 2015 10:24 PM
To: Amelia Wehunt
Subject: RE: Stormwater Classroom Guest Speaker Opportunity

I am interested. Please let me know what material you plan to cover and I can probably include it in my labs. I will need the content of the presentation and questions to give the students at the end of the presentation. Otherwise they will not listen. Thanks for the opportunity. Glenn _____
From: Amelia Wehunt [amelia.wehunt@timmons.com]
Sent: Friday, February 13, 2015 4:44 PM
To: Glenn F. Chappell
Cc: Jonathan A. Taylor; Jason S. MacDonald
Subject: Stormwater Classroom Guest Speaker Opportunity

Dear Dr. Chappell,

I'm reaching out to you on behalf of the University's stormwater program to see if there would be an opportunity to speak to your Introduction to Environmental Science course about stormwater management or a related topic this semester.

In previous semesters we spoke with one of Dr. Frey's classes and it seemed to complement his material while helping the University meet its stormwater program compliance goals.

We can make it as time specific as you prefer from either a quick 15 minutes or up to a whole lecture.

Please let me know if you are interested in this opportunity and we can discuss in further detail.

Thank you for your time,

Amelia

Amelia Wehunt, PE
Project Manager
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1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
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Mobile: 804.517.4996 | amelia.wehunt@timmons.com<mailto:amelia.wehunt@timmons.com>
LinkedIn: www.linkedin.com/in/ameliawehunt<https://urldefense.proofpoint.com/v2/url?u=http-3A__www.linkedin.com_in_ameliawehunt&d=AwMFAg&c=M6jrGf-tsbVD-_IIQXm5t9QIANL_IQIQ77prrocxArU&r=UMzaX1jjhECwy5W23YDff3PqJFKS-Ki4YvNlwq-0ca4&m=bIUx8GhT0SktZPm_ZboBC_Xb6buP7lOzGYvfXQn-lII&s=ng4zeQGk2IF195zuGnqbi1xRrTiUECouxTX7MihAUWk&e=>
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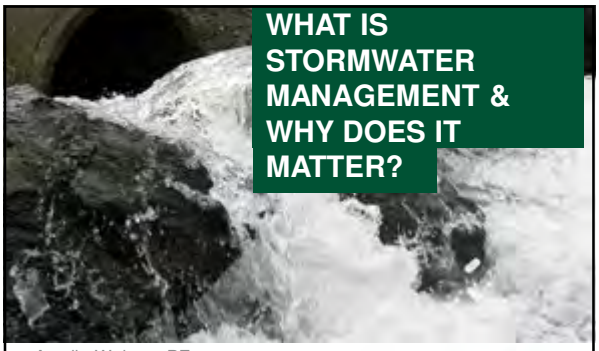

WHAT IS STORMWATER MANAGEMENT & WHY DOES IT MATTER?

Amelia Wehunt, PE

March 11 & 16, 2015

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Wastewater, Stormwater, & Drinking Water

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Pollutants in Stormwater

- ✓ Polluted stormwater runoff has many adverse effects on plants, fish, animals, and people!
- ✓ Common Stormwater Pollutants:
  - Sediment
  - Excess nutrients from fertilizers (nitrogen & phosphorus)
  - Bacteria
  - Debris and trash
  - Hazardous wastes such as pesticides or herbicides
  - Petroleum products from vehicles and parking lots
  - Deicing materials
  - Thermal pollution

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What is an MS4?

- ✓ Municipal separate storm sewer system
- ✓ Storm sewer pipes are not connected to sanitary sewer pipes
- ✓ An MS4 can be:
  - Cities or counties
  - Colleges or Universities
  - Correctional facilities
  - Hospitals
  - Military Bases

VSU is an MS4!

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Example of an MS4

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What Does an MS4 Operator Do?

- Public Outreach and Education
- Public Involvement/Participation
- Illicit Discharge Detection and Elimination
- Construction Site Stormwater Runoff
- Post-Construction Stormwater Management
- Pollution Prevention/Good Housekeeping

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MCM 1: Public Outreach and Education

- ✓ This MCM requires regulated small MS4s to develop and implement a program that promotes awareness of pollution prevention techniques and engagement with local watershed quality.

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MCM 2: Public Involvement/Participation

- ✓ This MCM requires regulated small MS4s provide opportunities for the public to play an active role in both in both the development and implementation of the program.

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MCM 3: Illicit Discharge Detection & Elimination

- ✓ Illicit discharges enter the system through two avenues:
  - Direct Connections
    - Wastewater piping either mistakenly or deliberately connected to the storm drains
  - Indirect Connections
    - Infiltration into the MS4 from cracked or damaged sanitary systems
    - Spills collected by drain inlets
    - Paint, used oil, or other pollutants dumped directly into a drain
- ✓ Once an illicit discharge is identified and/or detected, the source must be eliminated!

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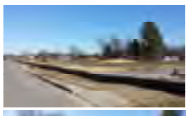
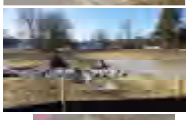
MCM 4: Construction Site Stormwater Runoff Control

- ✓ Ensures that sediment and pollutants from construction activities do no enter the storm sewer system
- ✓ Examples:
  - Construction entrance
  - Silt fence
  - Matting/Mulching
  - Storm drain inlet protection





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MCM 5: Post-Construction Stormwater Management

- ✓ Requires the operator of the regulated small MS4 to develop, implement, and enforce a program to enforce a program to reduce post-construction runoff to their storm sewer
- ✓ Includes a combination of structural and non-structural BMPs
- ✓ Some common structure BMPs include:
  - Detention ponds
  - Retention ponds
  - Bioretention
  - Green parking
  - Proprietary BMPs

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MCM 6: Pollution Prevention & Good Housekeeping

- ✓ Requires the small MS4 operator to examine and alter their own actions to help ensure reduction in the amount and type of pollutant that:
  - Collect on streets, parking lots, open spaces, and storage and vehicle maintenance areas
  - Results from actions such as environmentally damaging land development and flood management practices
- ✓ Common pollution prevention & good housekeeping practices:
  - Street sweeping
  - Maintaining storm inlets
  - Protecting equipment
  - Disposing of waste

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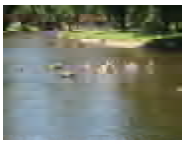
How does an MS4 Program Impact Water Quality?





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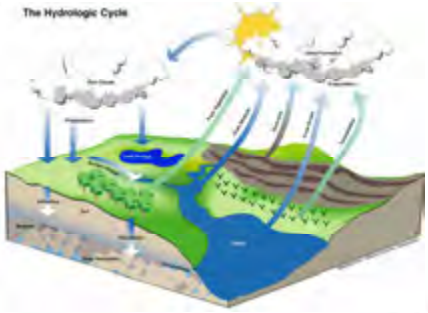
The Hydrologic Cycle



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Development & Urbanization Affect the Hydrologic Cycle!

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What Can We Do About Protecting Our Waters?

- ✓ Responsible water use and waste disposal
- ✓ Education of others on the importance of water quality
- ✓ Best Management Practices (BMPs)



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Did you know?

There is a retention basin BMP located behind the Jesse B. Bolling Building


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Before Construction of the Retention Pond

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After Construction of the Retention Pond

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Questions?

MS4 Programs ultimately serve to protect our waterways and ensure that water bodies are safe for recreation, aquatic life, and also to ensure safe drinking water for all of us!

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Graphic/Photo References

- http://www.cedarhills.org/utilities/storm-water
- http://nccwep.org/stormwater/
- http://drystonegarden.com/index.php/2010/05/
- http://www.indianasmallmouthalliance.org/index.php?subaction=showfull&id=1201312215&
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Appendix MCM 3

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
1	3/23/2015	E. Gallagher C. Nelson	311, 312

Outfall Description			End of Pipe Diameter: 32"	Pipe Material	
	X	Circular		X	Concrete
		Elliptical			PVC
		Box			Steel
		Other:		Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings				
	Outfall Submerged? Y (N)		Flow Present ? (Y) N	
	If yes, (Circle):		Width of Water Surface .58'	
	Water:		Approximate Depth of Water (ft.): .02'	
	Fully		Approximate Flow Velocity (ft./s): 2	
	Partially		Approximate Flow Rate (cfs): .0232	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		(Clear)	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None	X	Sheen	
	Sediment		Soapy Foam	
	Trash		Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	X
	Sediment		Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	Y (N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe	None	
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 1 – #311

Outfall 1 - #312

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 2	Inspection Date: 3/23/2015	Inspector: Chris Nelson, Erin Gallagher	Photo #'s: 313

Outfall Description	End of Pipe Diameter: 16"		Pipe Material	
	X	Circular		Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other: HDPE	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	
3/20/2015	0.74		
Weather Information Can Be Found @: http://www.wunderground.com/history/airport/KRIC/2014			Visual Observations

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)	
	If yes, (Circle):		Width of Water Surface	
	Water:		Approximate Depth of Water (ft.):	
	Fully		Approximate Flow Velocity (ft./s):	
	Partially		Approximate Flow Rate (cfs):	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		Clear	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None	X	Sheen	
	Sediment		Soapy Foam	
	Trash		Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	
	Sediment		Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	Y (N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe	None	
Pipe Condition (Circle)	Good	Fair / Poor
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 2 – #313

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Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 3	Inspection Date: 3/23/2015	Inspector: E. Gallagher, C. Nelson	Photo #'s: 316, 317

Outfall Description	End of Pipe Diameter: 60"		Pipe Material		
	X	Circular		X	Concrete
		Elliptical			PVC
		Box			Steel
		Other:			Other:

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate
3/20/2015	0.74	

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Visual Observations

Findings	Outfall Submerged? (Y) N		Flow Present ? (Y) N		
	If yes, (Circle):		Width of Water Surface 40"		
	Water:		Approximate Depth of Water (ft.): 7"		
	Fully		Approximate Flow Velocity (ft./s): .1"/s		
	(Partially)		Approximate Flow Rate (cfs): .016		
	Sediment:		Flow Color/Clarity (Check all that apply):		
	Fully		(Clear)		
	(Partially)		Muddy		
	Debris Around Outfall (Check all that apply):		Milky		
	None	X	Sheen		
	Sediment		Soapy Foam		
	Trash		Other:		
	Other:				
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):		
	None		None	X	
	Sediment	X	Petroleum		
	Trash		Sewage		
	Other:		Other:		

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	(Y)/N
Describe	Sediment @ bottom	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe	None	

Pipe Condition (Circle)	(Good)	Fair	Poor	
Describe				

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 3 – #316

Outfall 3 - #317

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Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
4	3/23/2015	E. Gallagher, C. Nelson	3 1 4

Outfall Description			End of Pipe Diameter: 54"	Pipe Material	
	X	Circular		X	Concrete
		Elliptical			PVC
		Box			Steel
		Other:		Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings				
	Outfall Submerged? Y (N)		Flow Present ? (Y) N	
	If yes, (Circle):		Width of Water Surface .5'	
	Water:		Approximate Depth of Water (ft.): .25"	
	Fully		Approximate Flow Velocity (ft./s): .5 ft/s	
	Partially		Approximate Flow Rate (cfs): .005	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		(Clear)	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None	X	Sheen	
	Sediment		Soapy Foam	
	Trash		Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	X
	Sediment		Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe	None	
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 4 – #314

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Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 5	Inspection Date: 3/23/2015	Inspector: E. Gallagher, C. Nelson	Photo #'s: 318, 319

Outfall Description	End of Pipe Diameter: 37"		Pipe Material	
	X	Circular	X	Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings	Outfall Submerged? Y (N)		Flow Present ? (Y) N
	If yes, (Circle):		Width of Water Surface 25"
	Water:		Approximate Depth of Water (ft.): .5"
	Fully		Approximate Flow Velocity (ft./s): .01 ft/s
	Partially		Approximate Flow Rate (cfs): .0009
	Sediment:		Flow Color/Clarity (Check all that apply):
	Fully		(Clear)
	Partially		Muddy
	Debris Around Outfall (Check all that apply):		Milky
	None	X	Sheen
	Sediment		Soapy Foam
	Trash		Other:
	Other:		
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):
	None	X	None X
	Sediment		Petroleum
	Trash		Sewage
	Other:		Other:

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	(Y) N
Describe	Algea	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe	Some	
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:	Algea			
Receiving Stream Name	Fleet's Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 5 – #318

Outfall 5 - #319

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Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
10	3/23/2015	E. Gallagher C. Nelson	320, 321

Outfall Description

End of Pipe Diameter: 30"

X	Circular	X	Concrete
	Elliptical		PVC
	Box		Steel
	Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate
3/20/2015	0.74	

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings

Outfall Submerged? (Y) N
If yes, (Circle):
Water: Fully / (Partially)
Sediment: Fully / (Partially)

Debris Around Outfall (Check all that apply):

None	
Sediment	X
Trash	
Other:	

Debris in Pipe (Check all that apply):

None	
Sediment	X
Trash	
Other:	

Visual Observations

Flow Present ? (Y) N
Width of Water Surface 19"
Approximate Depth of Water (ft.): 1"
Approximate Flow Velocity (ft./s): 1 ft/s
Approximate Flow Rate (cfs): .132

Flow Color/Clarity (Check all that apply):

(Clear)	
Muddy	
Milky	
Sheen	
Soapy Foam	
Other:	

Flow Odor (Check all that apply):

None	X
Petroleum	
Sewage	
Other:	

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	(Y) N
Describe	Some Stains	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	(Good)	Fair / Poor
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 6 – #320

Outfall 6 - #321

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Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
7	3/23/2015	E. Gallagher C. Nelson	326

Outfall Description			End of Pipe Diameter: 6"	Pipe Material	
	X	Circular			Concrete
		Elliptical			PVC
		Box			Steel
		Other:		Other: HDPE	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings				
	Outfall Submerged? Y (N) If yes, (Circle): Water: Fully Partially Sediment: Fully Partially		Flow Present ? Y (N) Width of Water Surface Approximate Depth of Water (ft.): Approximate Flow Velocity (ft./s): Approximate Flow Rate (cfs):	
	Debris Around Outfall (Check all that apply):		Flow Color/Clarity (Check all that apply):	
	None	X	Clear	
	Sediment		Muddy	
	Trash		Milky	
	Other: Leaves		Sheen	
			Soapy Foam	
			Other:	
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	
	Sediment		Petroleum	
	Trash		Sewage	
	Other: Leaves		Other:	

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:	Leaves			
Receiving Stream Name	Fleet's Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 7 – #326

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
8	3/23/2015	E. Gallagher, C. Nelson	323

Outfall Description

End of Pipe Diameter: 21"

X	Circular		Concrete
	Elliptical		PVC
	Box		Steel
	Other:		Other:

Pipe Material: X Concrete

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate
3/20/2015	0.74	

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings

Outfall Submerged? (Y) N
If yes, (Circle):
Water: Fully / (Partially)
Sediment: Fully / (Partially)

Debris Around Outfall (Check all that apply):

None	
Sediment	X
Trash	
Other:	

Debris in Pipe (Check all that apply):

None	
Sediment	X
Trash	
Other:	

Visual Observations

Flow Present ? Y (N)
Width of Water Surface 11"
Approximate Depth of Water (ft.): 1"
Approximate Flow Velocity (ft./s): 0
Approximate Flow Rate (cfs): 0

Flow Color/Clarity (Check all that apply):
(Clear)
Muddy
Milky
Sheen
Soapy Foam
Other:

Flow Odor (Check all that apply):

None	X
Petroleum	
Sewage	
Other:	

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	(Y)/N
Describe	Sediment in pipe	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe	Some	
Pipe Condition (Circle)	(Good) / Fair / Poor	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:	Plants			
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 8 – #323

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 9	Inspection Date: 3/23/2015	Inspector: E. Gallagher C. Nelson	Photo #'s: 322

Outfall Description	End of Pipe Diameter: 37"		Pipe Material	
	X	Circular	X	Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Visual Observations

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)	
	If yes, (Circle):		Width of Water Surface	
	Water:		Approximate Depth of Water (ft.):	
	Fully		Approximate Flow Velocity (ft./s):	
	Partially		Approximate Flow Rate (cfs):	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		Clear	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None		Sheen	
	Sediment		Soapy Foam	
	Trash	X	Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	X
	Sediment		Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe	Trash downstream	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		

Pipe Condition (Circle)	(Good)	Fair	Poor	
Describe				

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Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 9 – #322

Capital Outlay Facilities
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Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
10	3/23/2015	E. Gallagher C. Nelson	328, 329

Outfall Description	End of Pipe Diameter: 30"		Pipe Material		
	X	Circular		X	Concrete
		Elliptical			PVC
		Box			Steel
		Other:		Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)
	If yes, (Circle):		Width of Water Surface
	Water:		Approximate Depth of Water (ft.):
	Fully		Approximate Flow Velocity (ft./s):
	Partially		Approximate Flow Rate (cfs):
	Sediment:		Flow Color/Clarity (Check all that apply):
	Fully		Clear
	Partially		Muddy
	Debris Around Outfall (Check all that apply):		Milky
	None	X	Sheen
	Sediment		Soapy Foam
	Trash		Other:
	Other:		
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):
	None	X	None X
	Sediment		Petroleum
	Trash		Sewage
	Other:		Other:

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	(Y) N
Describe	Some Stains	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 10 – #328

Outfall 10 - #329

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
11	3/23/2015	E. Gallagher, CNelson	330, 331

Outfall Description			End of Pipe Diameter: 37'	Pipe Material	
	X	Circular		X	Concrete
		Elliptical			PVC
		Box			Steel
		Other:		Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings				
	Outfall Submerged? (Y) N If yes, (Circle): Water: Fully (Partially) Sediment: Fully (Partially)		Flow Present ? (Y) N Width of Water Surface 31" Approximate Depth of Water (ft.): 8" Approximate Flow Velocity (ft./s): .25ft/s Approximate Flow Rate (cfs): .43 Flow Color/Clarity (Check all that apply): (Clear) Muddy Milky Sheen Soapy Foam Other:	
	Debris Around Outfall (Check all that apply): None Sediment Trash Other:	X		
	Debris in Pipe (Check all that apply): None Sediment Trash Other:	X	Flow Odor (Check all that apply): None Petroleum Sewage Other:	X

Visual Observations (Circle)				
	Floatables	Y/(N)		
	Deposits/Stains	(Y)/N		
Describe	Sediment deposits			
Vegetation Condition (Circle)	Excessive	Inhibited		
Describe				
Pipe Condition (Circle)	(Good)	Fair	Poor	
Describe				

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Structure Condition (Circle)	Good	Fair	Poor	
Describe	Crack			
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 11 – #330

Outfall 11 - #331

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 12	Inspection Date: 3/23/2015	Inspector: E. Gallagher C. Nelson	Photo #'s: 332, 333

Outfall Description	End of Pipe Diameter: 30"		Pipe Material	
	X	Circular	X	Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)
	If yes, (Circle):		Width of Water Surface
	Water:		Approximate Depth of Water (ft.):
	Fully		Approximate Flow Velocity (ft./s):
	Partially		Approximate Flow Rate (cfs):
	Sediment:		Flow Color/Clarity (Check all that apply):
	Fully		Clear
	Partially		Muddy
	Debris Around Outfall (Check all that apply):		Milky
	None	X	Sheen
	Sediment		Soapy Foam
	Trash		Other:
	Other:		
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):
	None	X	None
	Sediment		Petroleum
	Trash		Sewage
	Other:		Other:

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	(Y) N
Describe	Stains in pipe	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		

Pipe Condition (Circle)	(Good)	Fair	Poor	
Describe				

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Fleets Branch			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 12 – #332

Outfall 12 - #333

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PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 13	Inspection Date:	Inspector:	Photo #'s:
	3/23/2015	E. Gallagher C. Nelson	334

Outfall Description	End of Pipe Diameter: 16"		Pipe Material	
	X	Circular	X	Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	
3/20/2015	0.74		
Weather Information Can Be Found @: http://www.wunderground.com/history/airport/KRIC/2014			Visual Observations

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)	
	If yes, (Circle):		Width of Water Surface	
	Water:		Approximate Depth of Water (ft.):	
	Fully		Approximate Flow Velocity (ft./s):	
	Partially		Approximate Flow Rate (cfs):	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		Clear	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None	X	Sheen	
	Sediment		Soapy Foam	
	Trash		Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	
	Sediment		Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	Good (Fair) Poor	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 13 – #334

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Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 14	Inspection Date: 3/23/2015	Inspector: E. Gallagher C. Nelson	Photo #'s: 335, 336

Outfall Description	End of Pipe Diameter: 18"		Pipe Material		
	X	Circular		X	Concrete
		Elliptical			PVC
		Box			Steel
		Other:		Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	
3/20/2015	0.74		
Weather Information Can Be Found @: http://www.wunderground.com/history/airport/KRIC/2014			Visual Observations

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)		
	If yes, (Circle):		Width of Water Surface		
	Water:		Approximate Depth of Water (ft.):		
	Fully		Approximate Flow Velocity (ft./s):		
	Partially		Approximate Flow Rate (cfs):		
	Sediment:		Flow Color/Clarity (Check all that apply):		
	Fully		Clear		
	Partially		Muddy		
	Debris Around Outfall (Check all that apply):		Milky		
	None	X	Sheen		
	Sediment		Soapy Foam		
	Trash		Other:		
	Other:				
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):		
	None	X	None		
	Sediment		Petroleum		
	Trash		Sewage		
	Other:		Other:		

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 14 – #335

Outfall 14 - #336

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Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
16	3/23/2015	E. Gallagher, C. Nelson	337, 338, 339

Outfall Description			End of Pipe Diameter: 9"	Pipe Material	
					Concrete
	X	Circular		X	PVC
		Elliptical			Steel
		Box		Other:	
		Other:			

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings				
	Outfall Submerged? (Y) N		Flow Present ? (Y) N	
	If yes, (Circle):		Width of Water Surface 1"	
	Water:		Approximate Depth of Water (ft.): .1"	
	Fully		Approximate Flow Velocity (ft./s): .5 ft/s	
	(Partially)		Approximate Flow Rate (cfs): .0003	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		(Clear)	
	(Partially)		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None		Sheen	
	Sediment	X	Soapy Foam	
	Trash		Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None		None	X
	Sediment	X	Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y (N)	
	Deposits/Stains	Y (N)	
Describe	Half underground		
Vegetation Condition (Circle)	(Excessive)	Inhibited	
Describe	Roots		
Pipe Condition (Circle)	(Good)	Fair	Poor
Describe			

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Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 16 – #337

Outfall 16 - #338

Outfall 16 - #339

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Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
17	3/23/2015	E. Gallagher C. Nelson	340

Outfall Description	End of Pipe Diameter: 9" Dual		Pipe Material	
	X	Circular	X	Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	
3/20/2015	0.74		
Weather Information Can Be Found @: http://www.wunderground.com/history/airport/KRIC/2014			Visual Observations

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)	
	If yes, (Circle):		Width of Water Surface	
	Water:		Approximate Depth of Water (ft.):	
	Fully		Approximate Flow Velocity (ft./s):	
	Partially		Approximate Flow Rate (cfs):	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		Clear	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None		Sheen	
	Sediment	X	Soapy Foam	
	Trash	X	Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None		None	
	Sediment	X	Petroleum	
	Trash	X	Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	Y (N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Virginia State University, VA 23806
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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 17 – #340

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Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
18	3/23/2015	E. Gallagher C. Nelson	341, 342, 343

Outfall Description			End of Pipe Diameter: 30"	Pipe Material	
	X	Circular		X	Concrete
		Elliptical			PVC
		Box			Steel
		Other:		Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate
3/20/2015	0.74	

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Visual Observations

Findings				
Outfall Submerged? (Y) N If yes, (Circle): Water: Fully Partially Sediment: Fully Partially		Flow Present ? (Y) N Width of Water Surface Approximate Depth of Water (ft.): Approximate Flow Velocity (ft./s): Approximate Flow Rate (cfs): Flow Color/Clarity (Check all that apply): (Clear) Muddy Milky Sheen Soapy Foam Other:		
Debris Around Outfall (Check all that apply): None Sediment Trash Other:		X		
Debris in Pipe (Check all that apply): None Sediment Trash Other:		X	Flow Odor (Check all that apply): None Petroleum Sewage Other:	X

Visual Observations (Circle)		
	Floatables	Y/(N)
	Deposits/Stains	(Y)/N
Describe	Broken, Under Tree	
Vegetation Condition (Circle)	(Excessive)	Inhibited
Describe	Under Tree	
Pipe Condition (Circle)	Good / Fair / (Poor)	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:	Tree			
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 18 – #341

Outfall 18 – #342

Outfall 18 – #343

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PO Box 9414
Virginia State University, VA 23806
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Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID #	Inspection Date:	Inspector:	Photo #'s:
19	3/23/2015	E. Gallagher C. Nelson	357, 358, 359

Outfall Description

End of Pipe Diameter: 12"

		Pipe Material	
X	Circular	X	Concrete
	Elliptical		PVC
	Box		Steel
	Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate
3/20/2015	0.74	

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings

Outfall Submerged? (Y) N
If yes, (Circle):
Water:
Fully
Partially
Sediment:
Fully
(Partially)

Debris Around Outfall (Check all that apply):

None	
Sediment	X
Trash	X
Other:	

Debris in Pipe (Check all that apply):

None	
Sediment	X
Trash	
Other:	

Visual Observations

Flow Present ? Y (N)
Width of Water Surface
Approximate Depth of Water (ft.):
Approximate Flow Velocity (ft./s):
Approximate Flow Rate (cfs):

Flow Color/Clarity (Check all that apply):
Clear
Muddy
Milky
Sheen
Soapy Foam
Other:

Flow Odor (Check all that apply):

None	
Petroleum	
Sewage	
Other:	

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe		
Vegetation Condition (Circle)	Excessive	(Inhibited)
Describe		
Pipe Condition (Circle)	Good / Fair / (Poor)	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

[signature] 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 19 – #357

Outfall 19 – #358

Outfall 19 – #359

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PO Box 9414
Virginia State University, VA 23806
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Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 20	Inspection Date:	Inspector:	Photo #'s:
	3/23/2015	E. Gallagher C. Nelson	361

Outfall Description	End of Pipe Diameter: 5"		Pipe Material		
	X	Circular			Concrete
		Elliptical	X		Steel
		Box	Other:		
		Other:			

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	
3/20/2015	0.74		
Weather Information Can Be Found @: http://www.wunderground.com/history/airport/KRIC/2014			Visual Observations

Findings	Outfall Submerged? Y (N)		Flow Present ? Y (N)	
	If yes, (Circle):		Width of Water Surface	
	Water:		Approximate Depth of Water (ft.):	
	Fully		Approximate Flow Velocity (ft./s):	
	Partially		Approximate Flow Rate (cfs):	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		Clear	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None		Sheen	
	Sediment		Soapy Foam	
	Trash	X	Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	
	Sediment		Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

[signature] 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 20 – #361

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 21	Inspection Date: 3/23/2015	Inspector: E. Gallagher C. Nelson	Photo #'s: 363

Outfall Description	End of Pipe Diameter: 18"		Pipe Material	
	X	Circular	X	Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	Visual Observations
3/20/2015	0.74		

Weather Information Can Be Found @:
http://www.wunderground.com/history/airport/KRIC/2014

Findings	Outfall Submerged? Y (N)		Flow Present ? (Y) N
	If yes, (Circle):		Width of Water Surface
	Water:		Approximate Depth of Water (ft.): .1"
	Fully		Approximate Flow Velocity (ft./s): Trickle
	Partially		Approximate Flow Rate (cfs):
	Sediment:		Flow Color/Clarity (Check all that apply):
	Fully		(Clear)
	Partially		Muddy
	Debris Around Outfall (Check all that apply):		Milky
	None	X	Sheen
	Sediment		Soapy Foam
	Trash		Other:
	Other:		
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):
	None	X	None X
	Sediment		Petroleum
	Trash		Sewage
	Other:		Other:

Visual Observations (Circle)	Floatables	Y/(N)
	Deposits/Stains	Y/(N)
Describe		
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		

Pipe Condition (Circle)	(Good)	Fair	Poor	
Describe				

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Virginia State University, VA 23806
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Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 21 – #363

Capital Outlay Facilities
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Virginia State University

Stormwater Outfall Inspection Form

Outfall ID # 22	Inspection Date: 3/23/2015	Inspector: E. Gallagher C. Nelson	Photo #'s: 365

Outfall Description	End of Pipe Diameter: 18"		Pipe Material	
	X	Circular	X	Concrete
		Elliptical		PVC
		Box		Steel
		Other:	Other:	

Date of Last Rainfall	Quantity of Last Rainfall (in.)	Estimated Discharge Rate	
3/20/2015	0.79		
Weather Information Can Be Found @: http://www.wunderground.com/history/airport/KRIC/2014			Visual Observations

Findings	Outfall Submerged? Y (N)		Flow Present ? (Y) N	
	If yes, (Circle):		Width of Water Surface 7"	
	Water:		Approximate Depth of Water (ft.): .5"	
	Fully		Approximate Flow Velocity (ft./s): 2 ft/s	
	Partially		Approximate Flow Rate (cfs): .049	
	Sediment:		Flow Color/Clarity (Check all that apply):	
	Fully		(Clear)	
	Partially		Muddy	
	Debris Around Outfall (Check all that apply):		Milky	
	None	X	Sheen	
	Sediment		Soapy Foam	
	Trash		Other:	
	Other:			
	Debris in Pipe (Check all that apply):		Flow Odor (Check all that apply):	
	None	X	None	X
	Sediment		Petroleum	
	Trash		Sewage	
	Other:		Other:	

Visual Observations (Circle)	Floatables	Y (N)
	Deposits/Stains	(Y) N
Describe	Some stains	
Vegetation Condition (Circle)	Excessive	Inhibited
Describe		
Pipe Condition (Circle)	(Good) Fair Poor	
Describe		

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Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Structure Condition (Circle)	Good	Fair	Poor	
Describe				
Notable Biology (animals, insects, plants, etc.) Describe:				
Receiving Stream Name	Appomattox River			

Notes/Necessary Action:

Certification:

If no action is required, certify the following:

"I certify that the outfall inspection is complete and that no illicit discharge is evident at this time."

_____ 3/23/2015

Signature of Inspector **Date**

If illicit discharge investigation is required, provide a time frame for investigation completion:_____

Document all steps utilized to eliminate the illicit discharge to include date, time, and actions. Intermittent discharges require three separate investigation with the appropriate documentation.

Upon illicit discharge elimination, re-inspect and certify the following:

"I certify that the illicit discharge has been eliminated, documented, and that no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date:_____

Outfall 22 – #365

Appendix MCM 4

Matthew Webb

From: Amelia Wehunt
Sent: Wednesday, August 26, 2015 1:57 PM
To: Matthew Webb
Subject: FW: VSU Annual Standards for ESC & SW

Follow Up Flag: Follow up
Flag Status: Flagged

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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From: Gavan, Larry (DEQ) [mailto:Larry.Gavan@deq.virginia.gov]
Sent: Tuesday, June 30, 2015 8:31 AM
To: Amelia Wehunt
Cc: Jonathan A. Taylor; McCutcheon, John (DEQ); Westermann, Pantea (DEQ)
Subject: RE: VSU Annual Standards for ESC & SW

Due to the ongoing changes effecting erosion and sediment control (ESC) and stormwater management (SWM), the Department will be administratively extending your previously approved Annual Standards and Specifications till 12/31/15. On the right side of the webpage found at this link please find the Statutory and Regulatory Crosswalks:
http://www.deq.virginia.gov/Programs/Water/StormwaterManagement.aspx

These Crosswalks were developed to assist those navigating our changing ESC and SWM environment.

Please continue to notify the DEQ with the required project information as per the approved Annual Standards and Specifications prior to initiating land-disturbance.

Hope this helps.
If you should have any questions please do not hesitate to contact me.
Thank you.
Regards,
Larry Gavan
Virginia Department of Environmental Quality
(804) 698-4040

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Tuesday, June 30, 2015 8:20 AM
To: Gavan, Larry (DEQ)
Cc: Jonathan A. Taylor; McCutcheon, John (DEQ); Westermann, Pantea (DEQ)
Subject: RE: VSU Annual Standards for ESC & SW

Thanks Larry—please provide the extension documentation needed to show that VSU is in compliance.

We will plan to re0submit in the late fall.

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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From: Gavan, Larry (DEQ) [mailto:Larry.Gavan@deq.virginia.gov]
Sent: Tuesday, June 30, 2015 7:34 AM
To: Amelia Wehunt
Cc: Jonathan A. Taylor; McCutcheon, John (DEQ); Westermann, Pantea (DEQ)
Subject: RE: VSU Annual Standards for ESC & SW

P.S. there is no charge for the extension.
Thx
Larry
804 698-4040

From: Gavan, Larry (DEQ)
Sent: Wednesday, June 24, 2015 6:57 AM
To: 'Amelia Wehunt'
Cc: Jonathan A. Taylor; McCutcheon, John (DEQ); Westermann, Pantea (DEQ)
Subject: RE: VSU Annual Standards for ESC & SW

Hi Amelia,
DEQ is extending previously approved Ann. Stds. and Specs. till 12/31/15.
Please submit an e-request for an extension.
Thx
L

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Tuesday, June 23, 2015 5:19 PM
To: Gavan, Larry (DEQ)
Cc: Jonathan A. Taylor; McCutcheon, John (DEQ); Westermann, Pantea (DEQ)
Subject: RE: VSU Annual Standards for ESC & SW

Larry,

Attached please find VSU's 2015 Combined Annual Standards and Specifications for ESC & SW for your review.

Please let us know if you have any comments or upon approval.

Thanks,

Amelia

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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From: Gavan, Larry (DEQ) [mailto:Larry.Gavan@deq.virginia.gov]
Sent: Thursday, April 16, 2015 2:38 PM
To: Amelia Wehunt
Cc: Jonathan A. Taylor; McCutcheon, John (DEQ); Westermann, Pantea (DEQ)
Subject: RE: VSU Annual Standards for ESC & SW

Hi Amelia,
Due to the ongoing changes effecting erosion and sediment control (ESC) and stormwater management (SWM), the Department will be administratively extending your previously approved Annual Standards and Specifications till 7/1/15. On the right side of the webpage found at this link please find the Statutory and Regulatory Crosswalks:
http://www.deq.virginia.gov/Programs/Water/StormwaterManagement.aspx

These Crosswalks were developed to assist those navigating our changing ESC and SWM environment.

Please continue to notify the DEQ with the required project information as per the approved Annual Standards and Specifications prior to initiating land-disturbance.

Hope this helps.
If you should have any questions please do not hesitate to contact me.
Thank you.
Regards,
Larry Gavan
Virginia Department of Environmental Quality
(804) 698-4040

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Thursday, April 16, 2015 2:33 PM
To: Gavan, Larry (DEQ)
Cc: Jonathan A. Taylor
Subject: RE: VSU Annual Standards for ESC & SW 2015-Submittal

Hi Larry,

Per our discussion, please grant VSU an extension of their current 2014 Combined Annual Standards and Specifications for ESC & SW through June 20, 2015, and we will resubmit the 2015 standards for review on/around June 1, 2015 for review and approval.

Thank you,

Amelia

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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To send me files greater than 20MB **click here.**

From: Amelia Wehunt
Sent: Thursday, April 16, 2015 2:11 PM
To: larry.gavan@deq.virginia.gov
Cc: Jonathan A. Taylor
Subject: VSU Annual Standards for ESC & SW 2015-Submittal

Larry,

Attached please find VSU's 2015 Combined Annual Standards and Specifications for ESC & SW for your review.

Please let us know if you have any comments or upon approval.

Thanks,

Amelia

Amelia Wehunt, PE
Project Manager

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Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
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2015 Land Disturbing Activities

(*) Indicates activity started within 2014-2015 Annual Reporting Period.

	Project Name	Project Location	Project Description	Estimated Disturbed Area Acreage	Approximate Start Date	Approximate Completion Date	On-site Project Manager Name	On-site Project Manager Contact Information	Responsible Land Disturber Permit Number	Operator Name	VAR10 Registration Number
*	Dupuy Parking Lot	VSU 475 Dupuy Avenue	Construct a new 150 space parking lot northeast of the new Gateway II Residence Hall	2.5	May 1, 2015	December 31, 2015	W M Jordan	TBD	TBD	W M Jordan	VAR10C-306
*	Multipurpose Center	Ettrick Village	Construct a new 168,000 convocation center and associated parking	50	January 1, 2014	January 1, 2016	Doug Sauer	site (804)479-3152 main (804)343-3433	39518 and 40874	S B Ballard	VAR10C-339
	Drainage Improvements/ Stormwater Master Plan	VSU Campus	Install drainage improvements and water quality improvements proposed in the Stormwater Master Plan and related to the implementation of the Campus Master Plan 20/20 Vision	276.7	July 1, 2012	June 30, 2019, with renewal anticipated	As noted by project below	As noted below by project	As noted by project below	Jonathan Taylor 804-524-5534	New VAR10-9268 Old VAR10-13-100047
	Athletic Trunk Line	VSU Campus	Install a new 60 inch storm line from Fleets Branch Creek to the Multipurpose Center to improve drainage at the Athletic Fields	2.59	May 1, 2014	June 1, 2015	Mark Eanes	804-658-7128	39525	Dickerson Construction	Has coverage under: New VAR10-9268 Old VAR10-13-100047
*	Lockett Hall Renovation	Myster Macklin Street	Perform a complete renovation to the existing Lockett Hall Academic Building	1.42	February 1, 2015	February 1, 2016	W M Jordan	TBD	TBD	W M Jordan	Has coverage under: New VAR10-9268 Old VAR10-13-100047

Project Name	Project Location	Project Description	Estimated Disturbed Area Acreage	Approximate Start Date	Approximate Completion Date	On-site Project Manager Name	On-site Project Manager Contact Information	Responsible Land Disturber Permit Number	Operator Name	VAR10 Registration Number
Matoaca Water Tank and Pump Station	3001 River Road	Install a new water tank and pump station	1.73	May 1, 2014	November 1, 2015	TBD	TBD	TBD	TBD	VAR10D-331
Gateway Dining and Events Hardscape	Gateway Dining & Events Center	Install hardscape improvements at the Gateway Dining and Events Center	TBD	TBD	TBD	TBD	TBD	TBD	TBD	Will have coverage under: New VAR10-9268 Old VAR10-13-100047
Gateway Dining and Events BMP Conversion	Gateway Dining & Events Center	Convert existing surface BMP to an underground detention facility behind VSU dining and events center.	0.70	TBD	TBD	TBD	TBD	TBD	TBD	Will have coverage under: New VAR10-9268 Old VAR10-13-100047
Trunk Storm Extension Phase III & IV	VSU Campus	Install a new storm line from Barnes Street north of Trinkle Hall to Daniel's Gym where the line will tie into the Phase I&2 Trunk Line.	3.56	TBD	TBD	TBD	TBD	TBD	TBD	Will have coverage under: New VAR10-9268 Old VAR10-13-100047

Capital Outlay & Facilities
PO Box 9044
Petersburg, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

INSPECTION REPORT

Project Name: Randolph Farm Greenhouse Addition Project Authority: Jonathan Taylor/Director C.O.
RLD Name: Jason Porterfield RLD No.: 39962
Project Location: VSU Randolph Farm Greenhouse Project No: 212-A2212-010
Inspector Name: Jason MacDonald Inspection Date: 09/11/14 Time: 11:15 p.m.

Previous violation(s) been corrected: ■ YES or ☐ NO

STAGE OF CONSTRUCTION

Pre-Construction Conference ☐	*Building Construction* ☐	*Construction of SWM Facilities* ☐
Clearing & Grubbing ☐	*Finish Grading* ☐	*Maintenance of SWM Facilities* ☐
Rough Grading ☐	*Final Stabilization* ■	*Other*_____ ☐

Item#	*State/Local Regulation*[1]	*Violation*		*Description and Location of Problem/Violation*[2]*, Required or Recommended Corrective Actions, and Other Comments/Notes*
		Initial	*Repeat*	
1	MS-3	N/A		Recommend continued watering of areas where EC mat has been recently placed to achieve germination and maintain stands of grass.
2	MS-18	N/A		Remove the section of silt fence along the and south side of the building at the foot of the slope. Touch up the grade and apply final seed to this area if needed after the silt fence is removed.
3	Spec 3.20	X		Revise the two (2) water quality check damns along the east side of the building to match the Rip Rap Water Quality Check Dam detail on sheet C3.1. 6" lower in the center than the sides.

1. Refers to applicable regulation found in the most recent publication of the Virginia Erosion and Sediment Control Regulations (9VAC25-840), Virginia Stormwater Management Permit Regulations (9VAC25-870), or Annual Standards and Specifications for ESC
2. Note whether or not off-site damage resulting from the problem/violation was evident during the inspection.

REQUIRED CORRECTIVE ACTION DEADLINE DATE: N/A (DD/MM/YY) Re-inspection Date: 09/26/14 (DD/MM/YY)

The required corrective action deadline date applies to all violations noted on this report. If listed violation(s) currently constitute non-compliance and/or required corrective actions are not completed by the deadline, a **NOTICE TO COMPLY, STOP WORK ORDER**, and/or other enforcement actions may be issued to the entity responsible for ensuring compliance on the above project.

Inspector: _____ (Signature) 09/11/14 (Date)

Acknowledgement of on-site report receipt: _____ (*Print Name*) _____ (*Signature*) _____ (*Date*)

This report will be provided to the following parties via mail, fax, or e-mail within 24 hours of inspection:

Capital Outlay & Facilities
PO Box 9044
Petersburg, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

SITE INSPECTION PHOTOS

Fig. 1 – Check dam along east side of building that requires shaping revisions (view-east).

Fig. 2 – Check dam along east side of building that requires shaping revisions (view-east).

Fig. 3 – Recommend cutting tall grass around the greenhouse addition (view-south).

Fig. 4 – Continue to water areas where new EC mat has been installed around the building (view-east).

Capital Outlay & Facilities
PO Box 9414
Petersburg, VA 23806
Phone: (804)524-5719
Fax: (804)524-5383

EROSION & SEDIMENT CONTROL INSPECTION REPORT

Project Name: Lockett Hall Renovation
Project Code: 212-17511-000
Project Authority: Jonathan Taylor/Director CO
RLD Name/No: Mark P Perkinson RLD No:38308
Inspector Name: Debra Albert
Inspection Date: 04/14/15 Time: 3:30pm

Previous violation(s) been corrected: ■ YES ■ NO

RAINFALL

Date of Rain	Amount (inches)	Initials
4/14/2015	0.20”	DCA

STAGE OF CONSTRUCTION

Pre-Construction Conference ☐	*Building Construction* ☐	*Construction of SWM Facilities* ☐
Clearing & Grubbing ☐	*Finish Grading* ☐	*Maintenance of SWM Facilities* ■
Rough Grading ☐	*Final Stabilization* ☐	*Other:* Waterproofing ■

Item#	*State/Local Regulation(1)*	*Violation*		*Description and Location of Problem/Violation(2), Required or Recommended Corrective Actions, and Other Comments/Notes*
		Initial	*Repeat*	
1	Spec 3.05		X	Add silt fence where excavation work is proceeding. Fig 1 thru Fig 4
2	Spec 3.07		X	Complete the storm drain inlet protection. Silt fence was installed, sediment filter shall be added Fig 5
3	MS17		X	Is the transport of soil and mud onto public roadways properly controlled? NO, there is soil on the asphalt and sidewalks. Fig 6 and Fig 7. Area was not cleaned
4				
5				

1. Refers to applicable regulation found in the most recent publication of the Virginia Erosion and Sediment Control Regulations (9VAC25-840), Virginia Stormwater Management Permit Regulations (9VAC25-870), or Annual Standards and Specifications for ESC.

2. Note whether or not off-site damage resulting from the problem/violation was evident during the inspection.

REQUIRED CORRECTIVE ACTION DEADLINE DATE: 04/14/2015 COB (DD/MM/YY) Re-inspection Date: 04/15/2015 (DD/MM/YY)

The required corrective action deadline date applies to all violations noted on this report. If listed violation(s) currently constitute non-compliance and/or required corrective actions are not completed by the deadline, a **NOTICE TO COMPLY, STOP WORK ORDER**, and/or other enforcement actions may be issued to the entity responsible for ensuring compliance on the above project.

Inspector: Debra C Albert 04/14/2015

Acknowledgement of on-site report receipt: Charlie Bradley _____ _____
Print Name *Signature* *Date*

This report will be provided to the following parties via mail, fax, or e-mail within 24 hours of inspection:
Beth Heath Brubaker
Jake Parsons

Capital Outlay & Facilities
PO Box 9044
Petersburg, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

SITE INSPECTION PHOTOS

REPEAT VIOATIONS

Fig 1 – Spec 3.05 West side of building

Fig 2 – Spec 3.05 West side of building

Fig 3 – Spec 3.05 East side of building

Fig 4 – Spec 3.05 North side of building.

Fig 5 Spec 3.07 West side of building

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Petersburg, VA 23806
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Fax: (804)524-5383

	
Fig 6 MS17 East side of building	Fig 7 MS17 East side of building

VIOATIONS THAT WERE CORRECTED 4/13/15

	
CORRECTED: Fig 1 – Spec 3.05.A-East side of building	CORRECTED: Fig 2 – Spec 3.05.A-North side of building
	
CORRECTED: Fig 3 – Spec 3.05.A-South side of building.	CORRECTED: Fig 4 – Spec 3.05.B-East side of building.

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Fax: (804)524-5383

	
CORRECTED: Fig 5 – Spec 3.05.B-East side of building	CORRECTED Fig 8 – MS17-North side of building

STORMWATER INSPECTIONS FOR VSMP GENERAL PERMIT LAND DISTURBING ACTIVITIES

PROJECT: Lockett Hall Renovation and Elevator Addition
MONITORING FOR THE WEEK BEGINNING: April 6, 2015

RAINFALL:

Date of Rain	Amount (inches)	Initials
4/7/2015	0.11	DCA

By this signature, I certify that this report is accurate and complete to the best of my knowledge:

_____

(Signature of Permittee or Designee)

EROSION AND SEIDMENTATION CONTROL FACILITIES INSPECTED: (At least once [twice, if on 303(d) listed stream for construction related parameters*] per 14 calendar days Or within 48 hours of a runoff producing rainfall event)

Facility Identification	Date of Inspection	Operating Properly (Y/N)	Describe corrective actions taken (may need to attach additional information)
	4/8/2015	Y	5:29pm – 1) Follow Up inspection on the perimeter silt fencing, accompanied by Steve Pancham (PM/MBP). WM Jordan had corrected areas of damaged silt fence from 6-13-11 report.
			2) Inlet protection outside of fenced in area OK. 3) Construction clean

OBSERVATION OF RUNOFF AT STORMWATER DISCHARGE OUTFALLS: (At least once [twice, if on 303(d) listed stream for construction related parameters*] per 14 calendar days Or within 48 hours of a runoff producing rainfall event)

Stormwater Discharge Outfall Identification	Date	Clarity	Floating Solids	Suspended Solids	Oil Sheen	Other obvious indicators of stormwater pollution (list & describe)	Visible sediment leaving the site? (Y/N)	If yes, describe actions taken to prevent future releases (may need to attach additional information)	Describe measures taken to clean up sediment outside of the disturbed limits (may need to attach additional information)

Clarity: Choose the number which best describes the clarity of the discharge where 1 is clear and 10 is very cloudy.
Floating Solids: Choose the number which best describes the amount of floating solids in the discharge where 1 is no solids and 10 the surface is covered in floating solids.
Suspended Solids: Choose the number which best describes the amount of suspended solids in the discharge where 1 is no solids and 10 is extremely muddy.
Oil Sheen: Is there an oil sheen in the stormwater discharge? Y or N

Capital Outlay & Facilities
PO Box 9414
Petersburg, VA 23806
Phone: (804)524-5719
Fax: (804)524-5383

EROSION & SEDIMENT CONTROL AND STORMWATER MANAGEMENT INSPECTION REPORT

Project Name: Lockett Hall
Project Code: 212-17511-000
Project Authority: Jonathan Taylor/ Direction CO
RLD Name/No: Mark Perkinson RLD No: 38308
Inspector Name: Erin Gallagher
Inspection Date: 6/4/15 Time: 10:00 P.M.

Previous violation(s) been corrected: ☑ YES ☐ NO

RAINFALL

Date of Rain	Amount (inches)	Initials
6/3/15	0.04	EEG
6/4/15	0.17	EEG

STAGE OF CONSTRUCTION

Pre-Construction Conference ☐	*Building Construction* ☑	*Construction of SWM Facilities* ☐
Clearing & Grubbing ☐	*Finish Grading* ☐	*Maintenance of SWM Facilities* ☐
Rough Grading ☐	*Final Stabilization* ☐	*Other:* _____ ☐

Item#	*State/Local Regulation(1)*	*Violation*		*Description and Location of Problem/Violation(2), Required or Recommended Corrective Actions, and Other Comments/Notes*
		Initial	*Repeat*	
1	II.A.4	X		Remove supply buckets from next to inlet
2				
3				
4				
5				

1. Refers to applicable regulation found in the most recent publication of the Virginia Erosion and Sediment Control Regulations (9VAC25-840), Virginia Stormwater Management Permit Regulations (9VAC25-870), or Annual Standards and Specifications for ESC.

2. Note whether or not off-site damage resulting from the problem/violation was evident during the inspection.

REQUIRED CORRECTIVE ACTION DEADLINE DATE: 6/11/15 (DD/MM/YY) Re-inspection Date: 6/11/15 (DD/MM/YY)

The required corrective action deadline date applies to all violations noted on this report. If listed violation(s) currently constitute non-compliance and/or required corrective actions are not completed by the deadline, a **NOTICE TO COMPLY, STOP WORK ORDER**, and/or other enforcement actions may be issued to the entity responsible for ensuring compliance on the above project.

Inspector: Erin Gallagher 06/04/2015

Acknowledgement of on-site report receipt: _____ *Print Name* _____ *Signature* _____ *Date*

This report will be provided to the following parties via mail, fax, or e-mail within 24 hours of inspection:

Capital Outlay & Facilities
PO Box 9044
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

SITE INSPECTION PHOTOS

 Remove buckets from next to inlet	

Capital Outlay & Facilities
PO Box 9414
Petersburg, VA 23806
Phone: (804)524-5719
Fax: (804)524-5383

EROSION & SEDIMENT CONTROL AND STORMWATER MANAGEMENT INSPECTION REPORT

Project Name: Multipurpose Center
Project Code: 212-17665-000
Project Authority: Jonathan Taylor/ Direction CO
RLD Name/No: Doug Sauer RLD No: 39518
Inspector Name: Erin Gallagher
Inspection Date: 6/4/15 Time: 10:30 P.M.

Previous violation(s) been corrected: ☐YES ☑NO

RAINFALL

Date of Rain	Amount (inches)	Initials
6/3/15	0.04	EEG
6/4/15	0.17	EEG

STAGE OF CONSTRUCTION

Pre-Construction Conference ☐	*Building Construction* ☑	*Construction of SWM Facilities* ☐
Clearing & Grubbing ☐	*Finish Grading* ☐	*Maintenance of SWM Facilities* ☐
Rough Grading ☐	*Final Stabilization* ☐	*Other:* _____ ☐

Item#	*State/Local Regulation(1)*	*Violation*		*Description and Location of Problem/Violation(2), Required or Recommended Corrective Actions, and Other Comments/Notes*
		Initial	*Repeat*	
1	MS10		X	Inlet protection at storm sewers need clean out/maintenance; some storm sewers need inlet protection
2	SPEC 3.05		X	Silt fence repairs needed.
3	SPEC 3.14	X		Slopes of basin need to be stabilized
4				
5				

1. Refers to applicable regulation found in the most recent publication of the Virginia Erosion and Sediment Control Regulations (9VAC25-840), Virginia Stormwater Management Permit Regulations (9VAC25-870), or Annual Standards and Specifications for ESC.

2. Note whether or not off-site damage resulting from the problem/violation was evident during the inspection.

REQUIRED CORRECTIVE ACTION DEADLINE DATE: 6/11/15 (DD/MM/YY) Re-inspection Date: 6/11/15 (DD/MM/YY)

The required corrective action deadline date applies to all violations noted on this report. If listed violation(s) currently constitute non-compliance and/or required corrective actions are not completed by the deadline, a **NOTICE TO COMPLY, STOP WORK ORDER**, and/or other enforcement actions may be issued to the entity responsible for ensuring compliance on the above project.

Inspector: Erin Gallagher 06/04/2015

Acknowledgement of on-site report receipt: _____ *Print Name* _____ *Signature* _____ *Date*

This report will be provided to the following parties via mail, fax, or e-mail within 24 hours of inspection:

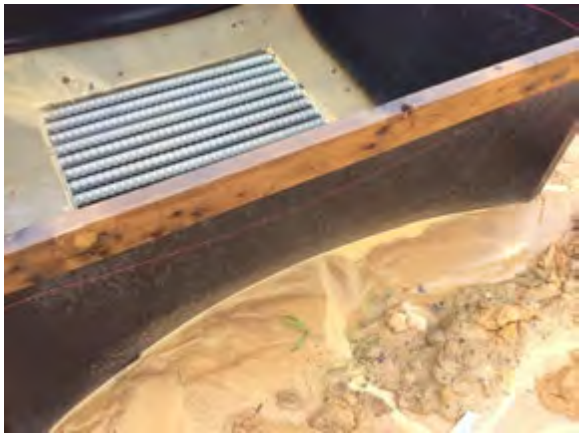
Capital Outlay & Facilities
PO Box 9044
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

SITE INSPECTION PHOTOS

Dirt needs to be behind silt fence

Clean out inlet protection

Stabilization needed



Inlet protection needs clean out and retrenched

Clean out and repair inlet protection

Trash and debris (concrete supplies) mus tbe disposed of properly

Appendix MCM 5

Matthew Webb

From: Amelia Wehunt
Sent: Wednesday, August 26, 2015 2:06 PM
To: Matthew Webb
Subject: FW: Campus Filterra Map and Conditions for Cleanup Day
Attachments: Filterra Bioretention Systems O&M Manual.pdf; Gateway II Filterra Map.pdf; Quad II Filterra Map.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
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From: Jane S. Harris [mailto:jsharris@vsu.edu]
Sent: Thursday, April 09, 2015 10:24 AM
To: Amelia Wehunt
Cc: Joel Koci
Subject: FW: Campus Filterra Map and Conditions for Cleanup Day

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From: Brian M. Haskins
Sent: Wednesday, April 08, 2015 10:06 AM
To: Jane S. Harris
Cc: Jonathan A. Taylor; Gilbert Hanzlik
Subject: Campus Filterra Map and Conditions for Cleanup Day

Jane,

Please see attached for the locations of the Filterras around the Quad II and Gateway II residence halls. After reviewing the conditions, there appear to be a few of them with missing trees or trees that are dead. In addition to those items, a lot of the Filterras in the parking lots have trash and a lot of sand in them from the snow removal operations. This may require some addition tools such as a shovel during cleanup.

In addition to the map, I have included the O&M manual for the units. This includes interesting facts around how the Filterra works, inspection and maintenance procedures, and maintenance reports.

Should we perform this cleanup on campus, I figured I can volunteer for four hours in the morning to help get things going.

Let me know if you have any questions.

Brian M. Haskins, EIT, PSP, LEED AP BD+C
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Capital Outlay and Facilities Management
PO Box 9414
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Fax: (804)524-5383

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:		Type: Inlet / (Roof)	Size:
BMP ID #:		Date/Time:	

Component	(Circle Y/N)		Comments
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
s Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stones in Need of Replacement?	Y	(N)	NA

Mulch			
Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.)		19"	Mulch depth appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch,
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impede bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced	N/A
Type of Mulch to be Added or Replaced	N/A
Date Mulch Added or Replaced:	N/A

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.)	5'	NA	Health of plant(s)	(Alive) / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	1"	NA	Damage to plant(s)?	Y / (N)	Y / N
Width at Widest Point (ft.):	3	NA	Plant(s) replaced?	Y / (N)	Y / N

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BMP ID #: 1	Date/Time: 4/30/15

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____
Signature of Inspector Date

If maintenance is required, provide a time frame for maintenance completion:
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Cimelia Wishart 6/30/15
Signature of Inspector Date

Next inspection date: Fall 2015

BMP #1-6 and #16-21: Roof Filterra (typical)

BMP #1-6 and #16-21: Roof Filterra (typical)

Note: These photos are representative of all roof Filterras on campus. As such, photos of every roof Filterra are not included.

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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:		Type: Inlet / (Roof)	Size: [illegible]
BMP ID #: 2		Date/Time: [illegible]	

Component	(Circle Y/N)		Comments
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stakes in Need of Replacement?	Y	(N)	NA

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):		1 [illegible]"	Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is eveidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch,
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	[illegible]	NA	Health of plant(s)	(Alive) / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	[illegible]	NA	Damage to plant(s)?	Y / (N)	Y / N
Width at Widest Point (ft.):	[illegible]	NA	Plant(s) replaced?	Y / (N)	Y / N

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BMP ID #: C	Date/Time:

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion. _____

Upon maintenance completion, re-inspect and certify the following

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Cinclia Whent 10/30/15

Signature of Inspector **Date**

Next inspection date _____

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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:			**Type:** Inlet / Roof	**Size:**
BMP ID #:			**Date/Time:**	
Component	**(Circle Y/N)**		**Comments**	
Initial Observations				
Standing Water?	Y	N		
Damage to Box Structure?	Y	N		
Damage to Grate?	Y	N		
Is Bypass Clear?	Y	N		
Waste				
Silt/Clay?	Y	N		
Cups/Bags/Trash?	Y	N		
Leaves?	Y	N		
Other?	Y	N		
Erosion Control				
Netting in Need of Replacement?	Y	N	NA	
Stones in Need of Replacement?	Y	N	NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):			Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.)	10" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evedence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypass piping or splash blocks

Amount of Mulch to be Added or Replaced.	NA
Type of Mulch to be Added or Replaced.	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grade (ft.):		NA	Health of plant(s):	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):		NA	Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):		NA	Plant(s) replaced?	Y / N	Y / N

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BMP ID #: 3	Date/Time: 4/30/15

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion:
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

[signature] 6/30/15

Signature of Inspector **Date**

Next inspection date Fall 2015

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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: [illegible]			**Type:** Inlet / (Roof)	**Size:** [illegible]
BMP ID #: 5			**Date/Time:** [illegible]	
Component	**(Circle Y/N)**		**Comments**	
Initial Observations				
Standing Water?	Y	(N)		
Damage to Box Structure?	Y	(N)		
Damage to Grate?	Y	(N)		
Is Bypass Clear?	(Y)	N		
Waste				
Silt/Clay?	Y	(N)		
Cups/Bags/Trash?	Y	(N)		
Leaves?	Y	(N)		
Other?	Y	(N)		
Erosion Control				
Netting in Need of Replacement?	Y	(N)	NA	
Stones in Need of Replacement?	Y	(N)	NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):		[illegible]	Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch:
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.)	[illegible]	NA	Health of plant(s)	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	[illegible]	NA	Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):	3	NA	Plant(s) replaced?	Y / N	Y / N

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BMP ID #: #1 Date/Time: 4/30/15

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Date

If maintenance is required, provide a time frame for maintenance completion: _____
Upon maintenance completion, re-inspect and certify the following.

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Amelia Walmsley 10/30/15

Signature of Inspector Date

Next inspection date: Fall 2015

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Fax: (804)524-5383

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:		**Type:** Inlet / Roof	**Size:**
BMP ID #:		**Date/Time:**	

Component	**(Circle Y/N)**		**Comments**
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stones in Need of Replacement?	Y	(N)	NA

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):		18"	Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impede bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	3'	NA	Health of plant(s):	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	1"	NA	Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.)	3'	NA	Plant(s) replaced?	Y / N	Y / N

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BMP ID #: | **Date/Time:**

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector | **Date**

If maintenance is required, provide a time frame for maintenance completion: ______________________

Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

[signature] 6/30/15

Signature of Inspector | **Date**

Next inspection date: Fall 2015

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Fax: (804)524-5383

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt			**Type:** Inlet / (Roof)	**Size:** 5'x7'
BMP ID #: 6			**Date/Time:** 4/30/15	
Component	**(Circle Y/N)**		**Comments**	
Initial Observations				
Standing Water?	Y	(N)		
Damage to Box Structure?	Y	(N)		
Damage to Grate?	Y	(N)		
Is Bypass Clear?	(Y)	N		
Waste				
Silt/Clay?	Y	(N)		
Cups/Bags/Trash?	Y	(N)		
Leaves?	Y	(N)		
Other?	Y	(N)		
Erosion Control				
Netting in Need of Replacement?	Y	(N)	NA	
Stones in Need of Replacement?	Y	(N)	NA	

Mulch			
Depth from Top of Slab to Surface of Mulch	**Inlet Filterra**	**Roof Filterra**	**Comments**
Measured (in.):			NA - to be provided during fall inspection.
Allowed range (in.):	16" - 18"	23" - 25"	(with tree replacement)

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is eveidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypasss piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	NA	NA	Health of plant(s)	Alive / (Dead)	Alive / Dead
Stem Diameter/Caliper (in.):	NA	NA	Damage to plant(s)?	(Y) / N	Y / N
Width at Widest Point (ft.):	NA	NA	Plant(s) replaced?	Y / (N)	Y / N

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BMP ID #: 6	Date/Time: 4/30/15

Notes:

Tree had died and a replacement has been ordered. It will be replaced as soon as possible

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____
Signature of inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: by next inspection
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ _____
Signature of Inspector **Date**

Next inspection date: Fall 2015

Capital Outlay and Facilities Management
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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:			**Type:** Inlet / Roof	**Size:**
BMP ID #:			**Date/Time:**	
Component	**(Circle Y/N)**		**Comments**	
Initial Observations				
Standing Water?	Y	N		
Damage to Box Structure?	Y	N		
Damage to Grate?	Y	N		
Is Bypass Clear?	Y	N		
Waste				
Silt/Clay?	Y	N		
Cups/Bags/Trash?	Y	N		
Leaves?	Y	N		
Other?	Y	N		
Erosion Control				
Netting in Need of Replacement?	Y	N	NA	
Stones in Need of Replacement?	Y	N	NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):			Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evedience of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypasss piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):			Health of plant(s)	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):			Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):			Plant(s) replaced?	Y / N	Y / N

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BMP ID #:	Date/Time:

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following.

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector _____ Date _____

If maintenance is required, provide a time frame for maintenance completion: _____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector Amelia Wehunt Date 6/30/15

Next inspection date: [illegible]

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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: [illegible]		Type: Inlet / (Roof)	Size: [illegible]
BMP ID #: [illegible]		Date/Time: [illegible]	
Component	**(Circle Y/N)**	**Comments**	
Initial Observations			
Standing Water?	Y (N)		
Damage to Box Structure?	Y (N)		
Damage to Grate?	Y (N)		
Is Bypass Clear?	(Y) N		
Waste			
Silt/Clay?	Y (N)		
Cups/Bags/Trash?	Y (N)		
Leaves?	Y (N)		
Other?	Y (N)		
Erosion Control			
Netting in Need of Replacement?	Y (N)	NA	
Stones in Need of Replacement?	Y (N)	NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):		19"	Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch,
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impede bypass piping or splash blocks

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	[illegible]		Health of plant(s)	(Alive) / Dead	Alive / Dead
Stem Diameter/Caliper (in.)	[illegible]		Damage to plant(s)?	Y / (N)	Y / N
Width at Widest Point (ft.):	[illegible]		Plant(s) replaced?	Y / (N)	Y / N

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BMP ID #:	Date/Time:

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector _____ Date _____

If maintenance is required, provide a time frame for maintenance completion
Upon maintenance completion, re-inspect and certify the following

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector Date 10/30/15

Next inspection date: _____

Capital Outlay and Facilities Management
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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: [illegible]		Type: Inlet / (Roof)	Size: 4' x 6'
BMP ID #: [illegible]		Date/Time: [illegible]	
Component	**(Circle Y/N)**		**Comments**
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stones in Need of Replacement?	Y	(N)	NA
Mulch			
Depth from Top of Slab to Surface of Mulch	**Inlet Filterra**	**Roof Filterra**	**Comments**
Measured (in.):		[illegible]	Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evedence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bycasss piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	[illegible]		Health of plant(s)	(Alive) / Dead	Alive / Dead
Stem Diameter/Cal per (in.):	[illegible]		Damage to plant(s)?	Y / (N)	Y / N
Width at Widest Point (ft.):	[illegible]		Plant(s) replaced?	Y / (N)	Y / N

Capital Outlay and Facilities Management
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Virginia State University, VA 23806
Phone: (804)524-5971
Fax: (804)524-5383

BMP ID #: [illegible] | Date/Time: [illegible]

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____

Signature of Inspector Date

If maintenance is required, provide a time frame for maintenance completion: _____
Upon maintenance completion, re-inspect and certify the following

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Completed 10/30/15

Signature of Inspector Date

Next inspection date: [illegible]

Capital Outlay and Facilities Management
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Fax: (804)524-5383

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:		Type: Inlet / Roof	Size:
BMP ID #:		Date/Time:	

Component	(Circle Y/N)	Comments
Initial Observations		
Standing Water?	Y (N)	
Damage to Box Structure?	Y (N)	
Damage to Grate?	Y (N)	
Is Bypass Clear?	(Y) N	
Waste		
Silt/Clay?	Y (N)	
Cups/Bags/Trash?	Y (N)	
Leaves?	Y (N)	
Other?	Y (N)	
Erosion Control		
Netting in Need of Replacement?	Y (N) NA	
Stones in Need of Replacement?	Y (N) NA	
Mulch		

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):		1 5"	Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impede bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grade (ft.):			Health of plant(s)	(Alive) / Dead	Alive / Dead
Stem Diameter/Caliper (in.):			Damage to plant(s)?	Y / (N)	Y / N
Width at Widest Point (ft.):			Plant(s) replaced?	Y / (N)	Y / N

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Fax: (804)524-5383

BMP ID #: [illegible] **Date/Time:** [illegible]

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirements indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion._____
Upon maintenance completion, re-inspect and certify the following

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Clarissa Wright 6/30/15

Signature of Inspector **Date**

Next inspection date: [illegible] 2015

Capital Outlay and Facilities Management
PO Box 9414
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Fax: (804)524-5383

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:			**Type:** Inlet / Roof	**Size:**
BMP ID #:			**Date/Time:**	
Component	**(Circle Y/N)**		**Comments**	
Initial Observations				
Standing Water?	Y	(N)		
Damage to Box Structure?	Y	(N)		
Damage to Grate?	Y	(N)		
Is Bypass Clear?	(Y)	N		
Waste				
Silt/Clay?	Y	(N)		
Cups/Bags/Trash?	Y	(N)		
Leaves?	Y	(N)		
Other?	Y	(N)		
Erosion Control				
Netting in Need of Replacement?	Y	(N)	NA	
Stones in Need of Replacement?	Y	(N)	NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):			Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evedence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch:
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypasss piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):			Health of plant(s)	(Alive) / Dead	Alive / Dead
Stem Diameter/Caliper (in.)			Damage to plant(s)?	Y / (N)	Y / N
Width at Widest Point (ft.):			Plant(s) replaced?	Y / (N)	Y / N

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BMP ID #:	Date/Time:

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirements indicated on the previous report.

Certification:

If no maintenance is required, certify the following

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Date

If maintenance is required, provide a time frame for maintenance completion: _____
Upon maintenance completion, re-inspect and certify the following.

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

[signature] 4/30/15

Signature of Inspector Date

Next inspection date: _____

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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: [illegible]		Type: Inlet / (Roof)	Size: [illegible]
BMP ID #: [illegible]		Date/Time: [illegible]	
Component	**(Circle Y/N)**		**Comments**
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Soil/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stones in Need of Replacement?	Y	(N)	NA
Mulch			

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):		2.2"	Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypasss piping or splash blocks

Amount of Mulch to be Added or Replaced:	
Type of Mulch to be Added or Replaced.	
Date Mulch Added or Replaced.	

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	6'	NA	Health of plant(s)	(Alive) / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	1.5"	NA	Damage to plant(s)?	Y / (N)	Y / N
Width at Widest Point (ft.):	4'	NA	Plant(s) replaced?	Y / (N)	Y / N

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BMP ID #: 21	Date/Time: [illegible]

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirements indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

[signature] 6/30/15

Signature of Inspector **Date**

Next inspection date: Feb 2016

Capital Outlay and Facilities Management
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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:		Type: (Inlet) / Roof	Size:
BMP ID #:		Date/Time:	

Component	(Circle Y/N)		Comments
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stones in Need of Replacement?	Y	(N)	NA

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):	12"		
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impede bypass piping or splash blocks

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	1'	NA	Health of plant(s)	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	1"	NA	Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):	1'	NA	Plant(s) replaced?	Y / N	Y / N

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BMP ID #: [illegible] Date/Time: [illegible]

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Date

If maintenance is required, provide a time frame for maintenance completion:
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

[illegible] 6/24/15

Signature of Inspector Date

Next inspection date: Fall 2015

BMP #7-13: Inlet Filterra (typical)

BMP #7-13: Inlet Filterra (typical)

Note: These photos are representative of all inlet Filterras on campus. As such, photos of every inlet Filterra are not included.

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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name:		Type: Inlet / Roof	Size:
BMP ID #:		Date/Time:	

Component	(Circle Y/N)	Comments
Initial Observations		
Standing Water?	Y (N)	
Damage to Box Structure?	Y (N)	
Damage to Grate?	Y (N)	
Is Bypass Clear?	(Y) N	
Waste		
Silt/Clay?	Y (N)	
Cups/Bags/Trash?	Y (N)	
Leaves?	Y (N)	
Debris?	Y (N)	
Erosion Control		
Necking in Need of Replacement?	Y (N) NA	
Stones in Need of Replacement?	Y (N) NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):	19"		mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evedence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch,
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypasss piping or splash blocks.

Amount of Mulch to be Added or Replaced:	during full maintenance.
Type of Mulch to be Added or Replaced:	
Date Mulch Added or Replaced:	

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grade (ft.):			Health of plant(s)	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):			Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):			Plant(s) replaced?	Y / N	Y / N

Capital Outlay and Facilities Management
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BMP ID #: 2 **Date/Time:**

Notes:

Maintenance was performed on this unit on April 24th, 2015.
This fulfills the maintenance requirement indicated on the previous report.

Add two bags of mulch during fall maintenance.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____
Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: _____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Amelia Wehunt 6/30/15
Signature of Inspector **Date**

Next inspection date: Fall 2015

Capital Outlay and Facilities Management
PO Box 9414
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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: [illegible] **Type:** (Inlet) / Roof **Size:** 2' x 6'

BMP ID #: 1 **Date/Time:** 4/22/16

Component	(Circle Y/N)		Comments
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stones in Need of Replacement?	Y	(N)	NA

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):	[illegible]		Mulch depth was appropriate during visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 24"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced: NA

Type of Mulch to be Added or Replaced: NA

Date Mulch Added or Replaced: NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet

Plant Information	#1	#2		#1	#2
Height Above Grade (ft.):	3'	NA	Health of plant(s):	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	[illegible]	NA	Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):	[illegible]	NA	Plant(s) replaced?	Y / N	Y / N

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Fax: (804)524-5383

BMP ID #: 1	Date/Time: 4/24/15

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion _____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Amelia Norment 6/30/15

Signature of Inspector **Date**

Next inspection date: Fall 2015

Capital Outlay and Facilities Management
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Fax: (804)524-5383

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: [illegible]	Type: (Inlet) / Roof	Size: [illegible]
BMP ID #: [illegible]	Date/Time: [illegible]	

Component	(Circle Y/N)		Comments
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	

Erosion Control

Netting in Need of Replacement?	Y	(N)	NA	
Stones in Need of Replacement?	Y	(N)	NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):	17"		Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
For inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypasss piping or splash blocks.

Amount of Mulch to be Added or Replaced:	
Type of Mulch to be Added or Replaced:	
Date Mulch Added or Replaced:	

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	8'	8'	Health of plant(s)	(Alive) / Dead	(Alive) / Dead
Stem Diameter/Caliper (in.):	2"	5"	Damage to plant(s)?	Y / (N)	Y / (N)
Width at Widest Point (ft.)	[illegible]	[illegible]	Plant(s) replaced?	Y / (N)	Y / (N)

Capital Outlay and Facilities Management
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BMP ID #: 10 Date/Time: 4/30/15

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Date

If maintenance is required, provide a time frame for maintenance completion:
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Cinda Walcutt 6/30/15

Signature of Inspector Date

Next inspection date: Fall 2015

Capital Outlay and Facilities Management
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Fax: (804)524-5933

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Weiland			**Type:** (Inlet) / Roof	**Size:** 12" x 4'
BMP ID #: 11			**Date/Time:** 4/13/2019	
Component	**(Circle Y/N)**		**Comments**	
Initial Observations				
Standing Water?	Y	(N)		
Damage to Box Structure?	Y	(N)		
Damage to Grate?	Y	(N)		
Is Bypass Clear?	(Y)	N		
Waste				
Silt/Clay?	Y	(N)		
Cups/Bags/Trash?	Y	(N)		
Leaves?	Y	(N)		
Other?	Y	(N)		
Erosion Control				
Netting in Need of Replacement?	Y	(N)	NA	
Stakes in Need of Replacement?	Y	(N)	NA	

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):	12"		Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impeade bypass piping or splash blocks

Amount of Mulch to be Added or Replaced	NA
Type of Mulch to be Added or Replaced	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	6' 2"	6' 5"	Health of plant(s)	(Alive) / Dead	(Alive) / Dead
Stem Diameter/Caliper (in.):	1"	1"	Damage to plant(s)?	Y / (N)	Y / (N)
Width at Widest Point (ft.):	2' 1"	2' 5"	Plant(s) replaced?	(Y) / N	(Y) / N

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BMP ID #: 11 **Date/Time:** 4/30/15

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

"If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____
Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: _____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Cindia Watkins 6/30/15
Signature of Inspector **Date**

Next inspection date: Fall 2015

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Fax: (804)524-5383

Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: [illegible] **Type:** (Inlet) / Roof **Size:** 2'x3'

BMP ID #: 12 **Date/Time:** 4/30/15

Component	(Circle Y/N)		Comments
Initial Observations			
Standing Water?	Y	(N)	
Damage to Box Structure?	Y	(N)	
Damage to Grate?	Y	(N)	
Is Bypass Clear?	(Y)	N	
Waste			
Silt/Clay?	Y	(N)	
Cups/Bags/Trash?	Y	(N)	
Leaves?	Y	(N)	
Other?	Y	(N)	
Erosion Control			
Netting in Need of Replacement?	Y	(N)	NA
Stones in Need of Replacement?	Y	(N)	NA

Mulch

Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):	20"		Mulch depth was appropriate based on visual inspection, continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impede bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced: [illegible] 3 - 4 bags during fall maintenance.

Type of Mulch to be Added or Replaced:

Date Mulch Added or Replaced:

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grade (ft.):	1'	NA	Health of plant(s):	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.):	1"	NA	Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):	1'	NA	Plant(s) replaced?	Y / N	Y / N

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BMP ID #: [illegible] **Date/Time:** [illegible]

Notes:

Maintenance was performed on this unit on April 24th, 2015.
This fulfills the maintenance requirement indicated on the previous report.

Add 3-4 bags of mulch during fall maintenance.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: ______
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

[signature] 6/30/15

Signature of Inspector **Date**

Next inspection date: [illegible]

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Filterra BMPs

Inspection & Maintenance Checklist

Inspector Name: A. [illegible]			Type: (Inlet) / Roof	Size: 6 x 4'
BMP ID #: 13			Date/Time: 4/30/19	
Component	(Circle Y/N)		Comments	
Initial Observations				
Standing Water?	Y	(N)		
Damage to Box Structure?	Y	(N)		
Damage to Grate?	Y	(N)		
Is Bypass Clear?	(Y)	N		
Waste				
Silt/Clay?	Y	(N)		
Cups/Bags/Trash?	Y	(N)		
Leaves?	Y	(N)		
Other?	Y	(N)		
Erosion Control				
Netting in Need of Replacement?	Y	(N)	NA	
Stones in Need of Replacement?	Y	(N)	NA	

Mulch			
Depth from Top of Slab to Surface of Mulch	Inlet Filterra	Roof Filterra	Comments
Measured (in.):	12"		Mulch depth was appropriate based on visual inspection. Continue to monitor during future inspections.
Allowed range (in.):	16" - 18"	23" - 25"	

Notes: If measured depth exceeds the allowed range, add mulch until the allowed range is achieved.
If there is evidence of ponding water, remove and replace all mulch. Remove any accumulated silt that may also be clogging the filter media.
Do not overfill unit with mulch;
for inlet units, mulch should not exceed bottom of inlet throat, and
for roof units, mulch should not impede bypass piping or splash blocks.

Amount of Mulch to be Added or Replaced:	NA
Type of Mulch to be Added or Replaced:	NA
Date Mulch Added or Replaced:	NA

Plantings

Note: Column #1 is the plant to the left when facing the throat of the inlet and column #2 is the plant to the right when facing the throat of the inlet.

Plant Information	#1	#2		#1	#2
Height Above Grate (ft.):	8'	NA	Health of plant(s)	Alive / Dead	Alive / Dead
Stem Diameter/Caliper (in.)	3"	NA	Damage to plant(s)?	Y / N	Y / N
Width at Widest Point (ft.):	5'	NA	Plant(s) replaced?	Y / N	Y / N

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BMP ID #: 13 Date/Time: 4/30/15

Notes:

Maintenance was performed on this unit on April 24th, 2015.

This fulfills the maintenance requirement indicated on the previous report.

Certification:

If no maintenance is required, certify the following.

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Date

If maintenance is required, provide a time frame for maintenance completion:
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Christina Whitaker 10/30/15

Signature of Inspector Date

Next inspection date Fall 2015

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Detention, Retention, & Impoundment BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Enhanced Extended Detention Basin	
BMP ID #: 14			Date/Time: 6/18/15 1317	
Component	**Yes**	**No**	**N/A**	**Comments**
i. Embankment				
A. Top				
1. Visual settlement		✓		
2. Misalignment		✓		
3. Cracking		✓		
B. Upstream Slope				
1. Erosion		✓		
2. Adequate groundcover	✓			
3. Trees, shrubs, or other vegetation	✓			
4. Cracks, settlements, or bulges		✓		
5. Rodent holes	✓			
C. Downstream Slope				Very minor amount of erosion.
1. Erosion	✓			
2. Adequate groundcover	✓			
3. Trees, shrubs, or other vegetation		✓		
4. Cracks, settlements, or bulges		✓		
5. Rodent holes		✓		
E. Drainage/seepage control				
1. Internal drains flowing			✓	
2. Seepage at toe		✓		
II. Emergency Spillway				
1. Eroding or backcutting			✓	
2. Obstruction			✓	
3. Leaking			✓	
4. Operational			✓	

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BMP ID #: 14			Date/Time: 6/18/15 1317	
Component	**Yes**	**No**	**N/A**	**Comments**
III. Principal Spillway Barrel				Groundhog living under riser top.
1. Seepage into pipe		✓		
2. Debris present		✓		
3. Displaced or offset joints		✓		
IV. Outlet Protection/Stilling Basin				
1. Obstruction		✓		
2. Adequate riprap	✓			
3. Undercutting at the outlet		✓		
4. Outlet channel scour		✓		
V. Internal Basin Area				
A. Low Flow Channel*				
1. Erosion		✓		
2. Adequate vegetation	✓			
3. Obstruction		✓		
B. Basin Bottom & Side Slopes				Heavy brush along sideslopes needs to be cut back.
1. Erosion		✓		
2. Adequate stabilization	✓			
3. Sediment accumulation		✓		
4. Floating debris		✓		
5. High water marks		✓		
6. Shoreline protection	✓			
C. Inflow Channels/Pipes				Heavy brush within west inlet rip-rap needs to be cut back.
1. Erosion		✓		
2. Adequate stabilization	✓			
3. Undercutting		✓		
4. Obstruction		✓		
D. Sediment Forebay				
1. Sediment accumulation		✓	✓	
2. Stable overflow into basin			✓	
E. Upland Landscaping			✓	
F. Aquatic Landscaping			✓	
*Only applies to Extended Detention Facilities				

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BMP ID #: 14			Date/Time: 6/18/15 1317	
Component	**Yes**	**No**	**N/A**	**Comments**

Notes: This facility is scheduled to be replaced. Continue to monitor groundhog hole at riser outlet to ensure that it doesn't become a concern prior to facility replacement.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time." — due to impending facility replacement

Signature of Inspector Amelie Wehunt **Date** 6/30/15

If maintenance is required, provide a time frame for maintenance completion:_____

Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector **Date**

_____ _____

Next inspection date: Fall 2015

BMP #14: Gateway Extended Detention

BMP #14: Gateway Extended Detention - Outlet

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Detention, Retention, & Impoundment BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Extended Detention Basin	
BMP ID #: 29			Date/Time: 6/18/15 0836	
Component	**Yes**	**No**	**N/A**	**Comments**
I. Embankment				Very small amount of erosion at NE corner of embankment that may need to be stabilized.
A. Top				
1. Visual settlement		✓		
2. Misalignment		✓		
3. Cracking		✓		
B. Upstream Slope				
1. Erosion		✓		
2. Adequate groundcover	✓			
3. Trees, shrubs, or other vegetation	✓			
4. Cracks, settlements, or bulges		✓		
5. Rodent holes		✓		
C. Downstream Slope				High brush along downstream shoulder needs to be cut back.
1. Erosion		✓		
2. Adequate groundcover	✓			
3. Trees, shrubs, or other vegetation	✓			
4. Cracks, settlements, or bulges		✓		
5. Rodent holes		✓		
E. Drainage/seepage control				
1. Internal drains flowing		✓		
2. Seepage at toe		✓		
II. Emergency Spillway				
1. Eroding or backcutting			✓	
2. Obstruction			✓	
3. Leaking			✓	
4. Operational			✓	

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BMP ID #: 29			Date/Time: 6/18/15 0836	
Component	**Yes**	**No**	**N/A**	**Comments**
III. Principal Spillway Barrel				
1. Seepage into pipe		✓		
2. Debris present		✓		
3. Displaced or offset joints		✓		
IV. Outlet Protection/Stilling Basin				
1. Obstruction		✓		
2. Adequate riprap	✓			
3. Undercutting at the outlet		✓		
4. Outlet channel scour		✓		
V. Internal Basin Area				
A. Low Flow Channel*				
1. Erosion		✓		
2. Adequate vegetation	✓			
3. Obstruction		✓		
B. Basin Bottom & Side Slopes				High brush along East and South side slopes needs to be cut back.
1. Erosion		✓		
2. Adequate stabilization	✓			
3. Sediment accumulation		✓		
4. Floating debris		✓		
5. High water marks		✓		
6. Shoreline protection	✓			
C. Inflow Channels/Pipes				
1. Erosion		✓		
2. Adequate stabilization	✓			
3. Undercutting		✓		
4. Obstruction		✓		
D. Sediment Forebay				
1. Sediment accumulation			✓	
2. Stable overflow into basin			✓	
E. Upland Landscaping			✓	
F. Aquatic Landscaping			✓	
*Only applies to Extended Detention Facilities				

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BMP ID #: 29			Date/Time: 6/18/15 0836	
Component	**Yes**	**No**	**N/A**	**Comments**

Notes:

Several high brush areas that need to be cleared.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector _____ **Date** _____

If maintenance is required, provide a time frame for maintenance completion: by next inspection

Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date: Fall 2015

BMP #29: Physical Plant Extended Detention Basin

BMP #29: Physical Plant Extended Detention Basin

BMP #29: Physical Plant Extended Detention Basin – Downstream Embankment

BMP #29: Physical Plant Extended Detention Basin - Outlet

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Detention, Retention, & Impoundment BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Retention Basin II	
BMP ID #: 30			Date/Time: 6/18/15 1409	
Component	**Yes**	**No**	**N/A**	**Comments**
I. Embankment				Need to clear brush and overgrowth, currently unable to access all of embankment.
A. Top				
1. Visual settlement		✓		
2. Misalignment		✓		
3. Cracking		✓		
B. Upstream Slope				
1. Erosion		✓		
2. Adequate groundcover	✓			
3. Trees, shrubs, or other vegetation	✓			
4. Cracks, settlements, or bulges		✓		
5. Rodent holes		✓		
C. Downstream Slope				Need to remove brush and overgrowth.
1. Erosion		✓		
2. Adequate groundcover	✓			
3. Trees, shrubs, or other vegetation	✓			
4. Cracks, settlements, or bulges		✓		
5. Rodent holes		✓		
E. Drainage/seepage control				
1. Internal drains flowing	✓			
2. Seepage at toe		✓		
II. Emergency Spillway				Need to remove brush and overgrowth.
1. Eroding or backcutting		✓		
2. Obstruction		✓		
3. Leaking		✓		
4. Operational		✓		

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BMP ID #: 30			Date/Time: 6/18/15 1409	
Component	**Yes**	**No**	**N/A**	**Comments**
III. Principal Spillway Barrel				
1. Seepage into pipe		✓		
2. Debris present		✓		
3. Displaced or offset joints		✓		
IV. Outlet Protection/Stilling Basin				
1. Obstruction		✓		
2. Adequate riprap	✓			
3. Undercutting at the outlet		✓		
4. Outlet channel scour		✓		
V. Internal Basin Area				Need to clear brush
A. Low Flow Channel*				
1. Erosion		✓		
2. Adequate vegetation	✓			
3. Obstruction		✓		
B. Basin Bottom & Side Slopes				Need to clear brush
1. Erosion		✓		
2. Adequate stabilization	✓			
3. Sediment accumulation		✓		
4. Floating debris		✓		
5. High water marks		✓		
6. Shoreline protection			✓	
C. Inflow Channels/Pipes				Minor erosion along channel and slight scouring ~~along~~ around headwall.
1. Erosion	✓			
2. Adequate stabilization	✓			
3. Undercutting	✓			
4. Obstruction		✓		
D. Sediment Forebay				
1. Sediment accumulation		✓		
2. Stable overflow into basin	✓			
E. Upland Landscaping	✓			
F. Aquatic Landscaping	✓			
*Only applies to Extended Detention Facilities				

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BMP ID #: 30			Date/Time: 6/18/15 1409	
Component	**Yes**	**No**	**N/A**	**Comments**

Notes:

Need to clear brush and overgrowth from several areas.

Minor damage to a small section of fence on East side of pond.

Unable to walk around entirety of top of basin due to overgrowth.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector _____ **Date** _____

If maintenance is required, provide a time frame for maintenance completion: by next inspection

Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date: Fall 2015

BMP #30: ROTC Retention Basin – Inflow Channel

BMP #30: ROTC Retention Basin – Forebay

BMP #30: ROTC Retention Basin

BMP #30: ROTC Retention Basin – Emergency Spillway

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Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Underground Storage Vault
BMP ID #: 15			Date/Time: 6/18/15 0935
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	Y	N	< 4", inlets/outlets clear
B. Trash/debris present?	Y	N	minimal
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?	N	N	
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping (1305)			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	
D. Obstruction?	N	N	

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BMP ID #: 15			Date/Time: 6/18/15 0935
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
E. Adequate riprap (If applicable)?	Y	N	Some trash/debris caught in rip-rap.
F. Undercutting at the outlet?	N	N	
G. Outlet channel scour?	N	N	

Notes:
Continue to remove trash from outlet as part of routine maintenance.

Certification:
If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Wright **Date** 6/23/15

If maintenance is required, provide a time frame for maintenance completion:_____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date: Fall 2015

BMP #15: Gateway II Underground Storage Vault

BMP #15: Gateway II Underground Storage Vault - Outfall

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Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Underground Irrigation Vault
BMP ID #: 24			Date/Time: 6/18/15 1013
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	N	N	
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?	N	N	
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	NA	NA	

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BMP ID #: 24			Date/Time: 6/18/15 1013
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	NA	NA	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:

Floats freely operating.

Visible inlet/outlet pipes clear.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Weber **Date** 6/23/15

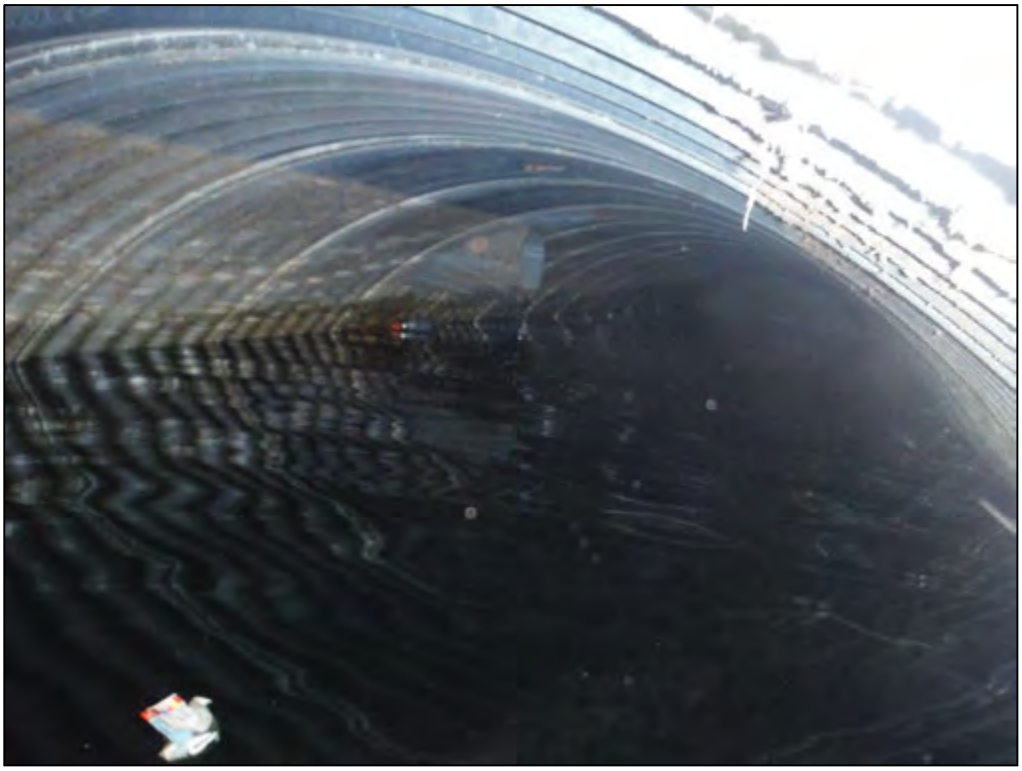
If maintenance is required, provide a time frame for maintenance completion:_____

Upon maintenance completion, re-inspect and certify the following:

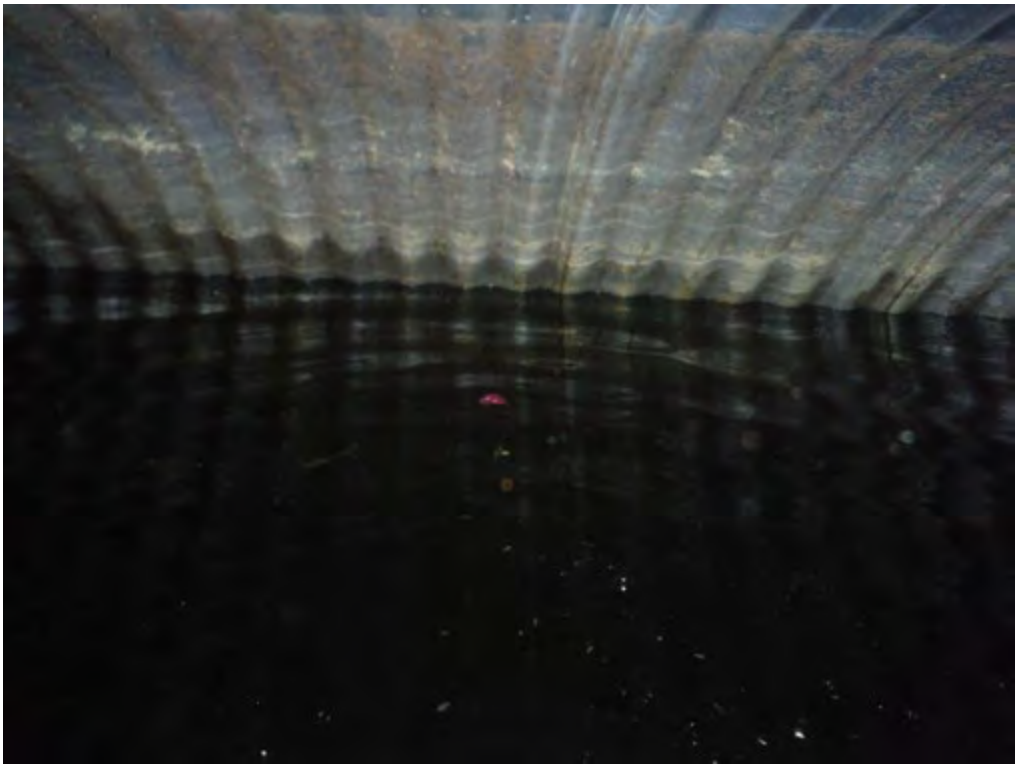
"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date: Fall 2015



BMP #24: Howard Quad II Irrigation



BMP #24: Howard Quad II Irrigation

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Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Underground Detention
BMP ID #: 25			Date/Time: 6/18/15 1103
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	Y	N	5-10" of sediment at upper end.
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?	N	N	
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	Y	N	
C. Clogging of outflow pipes?	N	N	

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BMP ID #: 25			Date/Time: 6/18/15 1103
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:
4"-12" of water in pipe due to possible sag point or accumulated sediment. Continue to monitor in future inspections.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

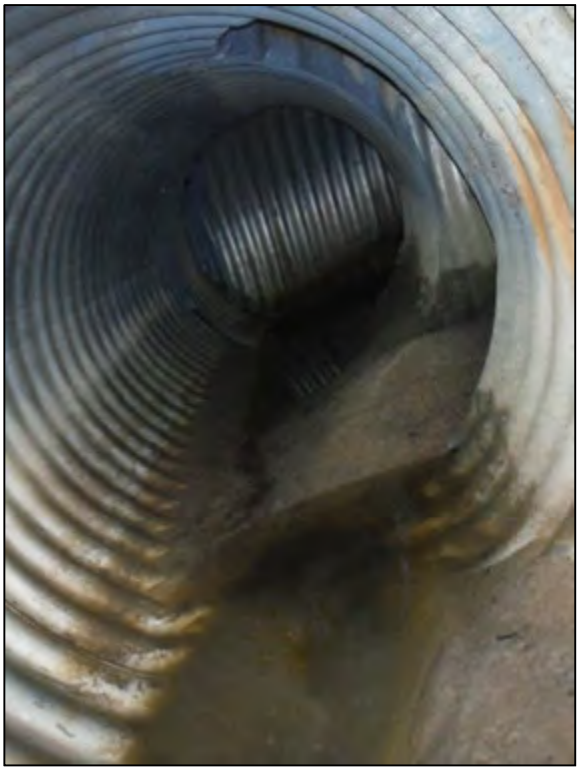
Signature of Inspector Matthew Wells — **Date** 6/23/15

If maintenance is required, provide a time frame for maintenance completion: _____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ — **Date** _____

Next inspection date: Fall 2015



BMP #25: Howard Quad II Underground CMP Detention (Pond 1A)

BMP #25: Howard Quad II Underground CMP Detention (Pond 1A)

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Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Underground Detention
BMP ID #: 26			Date/Time: 6/18/15 1115
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	N	N	
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?	N	N	
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	

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BMP ID #: 26			Date/Time: 6/18/15 1115
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Wall **Date** 6/23/15

If maintenance is required, provide a time frame for maintenance completion:_____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date: Fall 2015

BMP #26: Howard Quad II Underground CMP Detention (Pond 1B)

BMP #26: Howard Quad II Underground CMP Detention (Pond 1B)

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Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: M. Webb / A. Wehnat			Type of BMP: Underground Detention w/Sand Filter
BMP ID #: 27			Date/Time: 6/18/15 1028
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	N	N	
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?	N	N	
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	

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BMP ID #: 27			Date/Time: 6/18/15 1028
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:

39" of water

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Hall **Date** 6/23/15

If maintenance is required, provide a time frame for maintenance completion:_____

Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date: Fall 2015

BMP #27: Quad I Sand Filter – Sediment Chamber

BMP # 27: Quad I Sand Filter

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Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Underground Irrigation Vault
BMP ID #: 28			Date/Time: 6/18/15 1038
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	N	N	
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?	N	N	
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	

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BMP ID #: 28			Date/Time: 6/18/15 1038
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:

39" of water

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Wall **Date** 6/23/15

If maintenance is required, provide a time frame for maintenance completion:_____

Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date: Fall 2015

BMP #28: Quad I Sand Filter – Irrigation Vault

BMP #28: Quad I Irrigation Vault Inlet From Sand Filter

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StormFilter BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehnst / M. Webb				Type of BMP: Concrete Stormfilter		
BMP ID #: 22 (concrete area)				Date/Time: 6/18/15 1357		
				Maintenance required?		
Component:	**Yes**	**No**	**Conditions When Maintenance is Needed**	**Yes**	**No**	**Comments:**
I. Below Ground Vault						
Sediment accumulation top of cartridge		✓	Sediment depth exceeds 0.25 inches		✓	
Sediment accumulation in vault	✓		Sediment depth exceeds 4 inches in the first chamber	✓		>0.7' sediment
Submerged cartridges	✓		More than 4" of static water in the cartridge bay 24 hours after last rainfall event	✓		>1' water
Trash/debris accumulation		✓	Trash and debris accumulated on compost filter bed		✓	
Sediment in drain pipes or cleanouts		✓	Drain pipes and/or clean outs are full of sediment and/or debris		✓	
Damaged pipes		✓	Any part of any pipe crushed or damaged due to corrosion and/or settlement		✓	
Access cover damaged/not working		✓	Cover cannot be opened; one person cannot open the cover using normal lifting pressure; corrosion/deformation of cover		✓	
Vault structure includes cracks in wall or bottom; damage to the frame and/or top slab		✓	Cracks wider than ½ inch or evidence of soil particles entering the structure through cracks; determination that the vault is not structurally sound		✓	
			Cracks wider than ½ inch at the joint of any inlet/outlet pipeor evidence of soil particles entering through the cracks		✓	
Baffles	NA		Baffles corroding, cracking, warping, and/or showing signs of failure	NA		
Access ladder damaged		✓	Ladder is corroded or deteriorated, not functioning properly, not securely secured to the structure wall and/or missing rungs; cracks; misalignment		✓	

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BMP ID #: 22				Date/Time: 6/18/15 1357		
				Maintenance required?		
Component:	**Yes**	**No**	**Conditions When Maintenance is Needed**	**Yes**	**No**	**Comments:**
II. Below Ground Cartridge Type						
Filter Media	✓		Drawdown of water theough the media takes longer than one hour and/or overflow occurs frequently		✓	Zpg media
Short Circuiting		✓	Flows do no properly enter filter cartridges		✓	

Notes:

Replace filters.

At the time of this inspection, it is our understanding that maintenance is being scheduled.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: by next inspection
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date: Fall 2015

BMP #22: Howard Quad II Stormfilter

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StormFilter BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb				Type of BMP: Contech stormfilter		
BMP ID #: 23 (grass area)				Date/Time: 6/18/15 1355		
				Maintenance required?		
Component:	**Yes**	**No**	**Conditions When Maintenance is Needed**	**Yes**	**No**	**Comments:**
I. Below Ground Vault						
Sediment accumulation top of cartridge		✓	Sediment depth exceeds 0.25 inches		✓	
Sediment accumulation in vault	✓		Sediment depth exceeds 4 inches in the first chamber	✓		>0.5'
Submerged cartridges	✓		More than 4" of static water in the cartridge bay 24 hours after last rainfall event	✓		>1'
Trash/debris accumulation		✓	Trash and debris accumulated on compost filter bed		✓	
Sediment in drain pipes or cleanouts	✓		Drain pipes and/or clean outs are full of sediment and/or debris	✓		
Damaged pipes		✓	Any part of any pipe crushed or damaged due to corrosion and/or settlement		✓	
Access cover damaged/not working		✓	Cover cannot be opened; one person cannot open the cover using normal lifting pressure; corrosion/deformation of cover		✓	
Vault structure includes cracks in wall or bottom; damage to the frame and/or top slab		✓	Cracks wider than ½ inch or evidence of soil particles entering the structure through cracks; determination that the vault is not structurally sound		✓	
			Cracks wider than ½ inch at the joint of any inlet/outlet pipeor evidence of soil particles entering through the cracks		✓	
Baffles	NA		Baffles corroding, cracking, warping, and/or showing signs of failure	NA		
Access ladder damaged		✓	Ladder is corroded or deteriorated, not functioning properly, not securely secured to the structure wall and/or missing rungs; cracks; misalignment		✓	

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BMP ID #: 23				Date/Time: 6/18/15 1355		
				Maintenance required?		
Component:	**Yes**	**No**	**Conditions When Maintenance is Needed**	**Yes**	**No**	**Comments:**
II. Below Ground Cartridge Type						
Filter Media		✓	Drawdown of water theough the media takes longer than one hour and/or overflow occurs frequently		✓	Zpg
Short Circuiting		✓	Flows do no properly enter filter cartridges		✓	

Notes:

Replace filters and clean outlet pipe.

At the time of this inspection, it is our understanding that maintenance is being scheduled.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____
Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: by next inspection
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ _____
Signature of Inspector **Date**

Next inspection date: Fall 2015

BMP #23: Howard Quad Courtyard Stormfilter

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StormFilter BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb				Type of BMP: Contech Stormfilter		
BMP ID #: 35				Date/Time: 6/18/15 1420		
				Maintenance required?		
Component:	**Yes**	**No**	**Conditions When Maintenance is Needed**	**Yes**	**No**	**Comments:**
I. Below Ground Vault						
Sediment accumulation top of cartridge		✓	Sediment depth exceeds 0.25 inches		✓	
Sediment accumulation in vault		✓	Sediment depth exceeds 4 inches in the first chamber		✓	
Submerged cartridges		✓	More than 4" of static water in the cartridge bay 24 hours after last rainfall event		✓	
Trash/debris accumulation		✓	Trash and debris accumulated on compost filter bed		✓	
Sediment in drain pipes or cleanouts		✓	Drain pipes and/or clean outs are full of sediment and/or debris		✓	
Damaged pipes		✓	Any part of any pipe crushed or damaged due to corrosion and/or settlement		✓	
Access cover damaged/not working		✓	Cover cannot be opened; one person cannot open the cover using normal lifting pressure; corrosion/deformation of cover		✓	
Vault structure includes cracks in wall or bottom; damage to the frame and/or top slab		✓	Cracks wider than ½ inch or evidence of soil particles entering the structure through cracks; determination that the vault is not structurally sound		✓	
			Cracks wider than ½ inch at the joint of any inlet/outlet pipeor evidence of soil particles entering through the cracks		✓	
Baffles		✓	Baffles corroding, cracking, warping, and/or showing signs of failure		✓	
Access ladder damaged		✓	Ladder is corroded or deteriorated, not functioning properly, not securely secured to the structure wall and/or missing rungs; cracks; misalignment		✓	

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BMP ID #: 35				Date/Time: 6/18/15 1420		
				Maintenance required?		
Component:	**Yes**	**No**	**Conditions When Maintenance is Needed**	**Yes**	**No**	**Comments:**
II. Below Ground Cartridge Type						
Filter Media		✓	Drawdown of water theough the media takes longer than one hour and/or overflow occurs frequently		✓	
Short Circuiting		✓	Flows do no properly enter filter cartridges		✓	

Notes:

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Matthew Wolf — **Signature of Inspector**

6/23/15 — **Date**

If maintenance is required, provide a time frame for maintenance completion:_____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ — **Signature of Inspector**

_____ — **Date**

Next inspection date: Fall 2015

BMP #35: Bookstore Stormfilter

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Intermittent Sand Filter

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb			Type of BMP: Deleware Sand Filter	
BMP ID #: 31			Date/Time: 6/18/15 0951	
Component	**Yes**	**No**	**N/A**	**Comments**
I. Debris Cleanout				
A. Contributing areas clean of debris	✓			
B. Filtration Facility clean of debris		✓		
C. Inlets and outlets clear of debris	✓			
II. Vegetation in Contributing Drainage Area				
A. Stabilized	✓			
B. Active evidence of erosion		✓		
C. Area mowed and clippings removed	✓			
III. Oil & Grease				
A. Evidence of filter surface clogging		✓		
B. Activities in drainage area to minimize oil & grease entry	✓			
IV. Water retention where required				
A. Water holding chambers at normal pool	✓			
B. Evidence of leakage		✓		
V. Sediment Deposition				
A. Filtration chambers clean of sediment		✓		
B. Water chambers not more than ½ full of sediment		✓		
VI. Structural Components				
A. Evidence of structural deterioration		✓		
B. Grates are in good condition			✓	
C. Evidence of spalling or cracking of structural parts		✓		

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BMP ID #: 31			Date/Time: 6/18/15	
Component	**Yes**	**No**	**N/A**	**Comments**
VII. Outlets/Overflow Spillway				
A. Obstruction		✓		
B. Adequate riprap (If applicable)			✓	
C. Undercutting at the outlet			✓	
D. Outlet channel scour			✓	
VIII. Overall Function of Facility				
A. Evidence of flow		✓		
B. Noticeable odors		✓		

Notes: Have sedimentation chamber pumped out, remove trash and sediment, and refil with clean water up to normal pool. Clean trash out of sand filter.
At the time of this inspection, it is our understanding that maintenance is in the process of being scheduled.

Certification:
If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____
Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: By next inspection Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ _____
Signature of Inspector **Date**

Next inspection date: Fall 2015

BMP #31: Delaware Sand Filter - Sedimentation Chamber

BMP #31: Delaware Sand Filter - Sand Filter Chamber

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Sorbtive Filter BMPs

Inspection & Maintenance Checklist

Inspector Name: M. Webb / A. Wehunt				Type of BMP: Sorbtive Filter 2c		
BMP ID #: 32				Date/Time: 6/18/15 1335		
				Maintenance required?		
Component:	Yes	No	Conditions When Maintenance is Needed	Yes	No	Comments:
The access manhole or access doors are functioning properly and are structurally sound	✓				✓	
Sediment and oil are present (provide depths)	✓				✓	1"
Floatable pollutant accumulation is present in the Pre-treatment Bay		✓			✓	
The Cartrdge Bay is visually inspected for sediment depth (provide depth)*(If sediment depth is greater than 6 inches, maintenance is required	✓				✓	1"
Proper draindown is occurring in the Cartridge Bay *(If at least 40 hours of dry weather have elapsed, since the most recent runoff event and the Bay contains more than 3 inches of water above the sediment layer, the Sorbtive BRICKs required cleaning or replacement	✓				✓	
The internal components show no signs of damage	✓				✓	

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Notes:

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Matthew Wall — **Signature of Inspector**

6/23/15 — **Date**

If maintenance is required, provide a time frame for maintenance completion:_____

Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ — **Signature of Inspector**

_____ — **Date**

Next inspection date: Fall 2015

BMP #32: Lot #36 Sorbtive Filter – Sedimentation Chamber

BMP #32: Lot #36 Sorbtive Filter –Trash Guard and Filter

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Sorbtive Filter BMPs

Inspection & Maintenance Checklist

Inspector Name: A. Wehunt / M. Webb				Type of BMP: Sorbtive Filter 1C		
BMP ID #: 33				Date/Time: 6/18/15 1342		
				Maintenance required?		
Component:	**Yes**	**No**	**Conditions When Maintenance is Needed**	**Yes**	**No**	**Comments:**
The access manhole or access doors are functioning properly and are structurally sound	✓				✓	
Sediment and oil are present (provide depths)		✓			✓	
Floatable pollutant accumulation is present in the Pre-treatment Bay		✓			✓	
The Cartrdge Bay is visually inspected for sediment depth (provide depth)*(If sediment depth is greater than 6 inches, maintenance is required	✓				✓	0.5"
Proper draindown is occurring in the Cartridge Bay *(If at least 40 hours of dry weather have elapsed, since the most recent runoff event and the Bay contains more than 3 inches of water above the sediment layer, the Sorbtive BRICKs required cleaning or replacement	✓				✓	
The internal components show no signs of damage	✓				✓	

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Notes:

Certification:
If no maintenance is required, certify the following:
"I certify that the inspection is complete and that no action is necessary at this time."

Martha Wall — 6/23/15

Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion:_____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ _____

Signature of Inspector **Date**

Next inspection date: Fall 2015

BMP #33: Lot #37 Sorbtive Filter – Sedimentation Chamber

BMP #33: Lot 37 Sorbtive Filter – Filters

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Sorbtive Filter BMPs

Inspection & Maintenance Checklist

Inspector Name: M. Webb / A. Wehunt				Type of BMP: Sorbtive Filter 10L		
BMP ID #: 34				Date/Time: 6/18/15 1350		
				Maintenance required?		
Component:	Yes	No	Conditions When Maintenance is Needed	Yes	No	Comments:
The access manhole or access doors are functioning properly and are structurally sound	✓				✓	
Sediment and oil are present (provide depths)	✓				✓	0.5" of sediment (no oil observed)
Floatable pollutant accumulation is present in the Pre-treatment Bay	✓			✓		Remove accumulated trash and debris.
The Cartrdge Bay is visually inspected for sediment depth (provide depth)*(If sediment depth is greater than 6 inches, maintenance is required	✓				✓	0.5"
Proper draindown is occurring in the Cartridge Bay *(If at least 40 hours of dry weather have elapsed, since the most recent runoff event and the Bay contains more than 3 inches of water above the sediment layer, the Sorbtive BRICKs required cleaning or replacement	✓				✓	
The internal components show no signs of damage	✓				✓	

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Notes:

Certification:
If no maintenance is required, certify the following:
"I certify that the inspection is complete and that no action is necessary at this time."

_____ _____
Signature of Inspector **Date**

If maintenance is required, provide a time frame for maintenance completion: by next inspection.
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

_____ _____
Signature of Inspector **Date**

Next inspection date: Fall 2015.

BMP #34: Lot #21 Sorbtive Filter

BMP #34: Lot #21 Sorbtive Filter – Sedimentation Chamber

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Underground Detention Systems (Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: M. Webb			Type of BMP: Rain tank
BMP ID #: 36 (Bookstore)			Date/Time: 7/17/15 810
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	Y	N	Unable to tell depth of sediment, no baseline.
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?	N	N	
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	

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BMP ID #: 36			Date/Time: 7/17/15 810
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	N	N	
G. Outlet channel scour?	NA	NA	

Notes:

Port #1: Depth to sediment = 101 " Depth to water = 82 " Depth of water = 19"

Port #2: DtS = 99.5" DtW = 80.5" DoW = 19"

Port #3: DtS = 94.75" DtW = 77.5" DoW = 17.25"

Note: Depth to bottom of raintank is unknown for all ports.
Depth to sediment from previous inspection is unknown for all ports.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Welch **Date** 7/20/15

If maintenance is required, provide a time frame for maintenance completion:_____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date:_____

BMP #36: University Bookstore Rain Tank (Inspection Ports)

BMP #36: University Bookstore Rain Tank (Yard Inlet 1)

BMP #36: University Bookstore Rain Tank (Yard Inlet 1 - Sump)

BMP #36: Inspection Port #1

BMP #36: University Bookstore Rain Tank (Yard Inlet 2)

BMP #36: University Bookstore Rain Tank (Yard Inlet 2 - Sump)

BMP #36: Inspection Port #2

BMP #36: Inspection Port #3

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Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: M. Webb			Type of BMP: Rain tank
BMP ID #: 40 (Lee St. Parking Lot #21)			Date/Time: 7/17/15 847
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	N	N	
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?			
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	

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BMP ID #: 40			Date/Time: 7/17/15
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:

Dry.

Depth to bottom of inspection port = 61 5/8"

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Wall

Date 7/20/15

If maintenance is required, provide a time frame for maintenance completion:_____

Upon maintenance completion, re-inspect and certify the following:

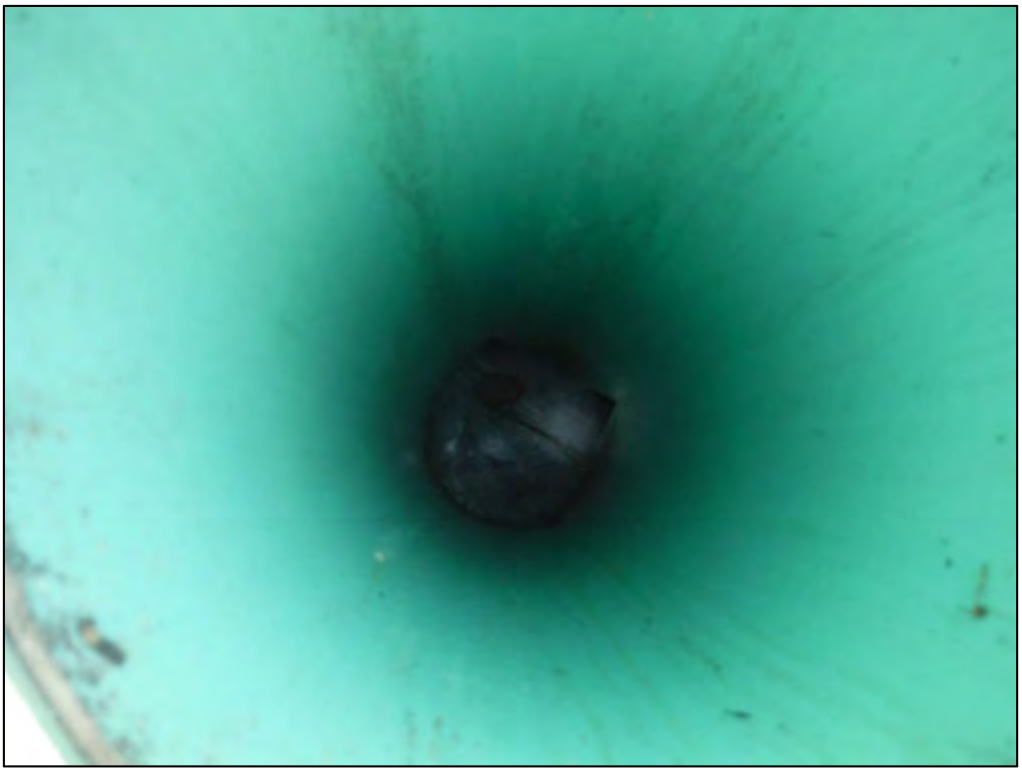
"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____

Date _____

Next inspection date:_____

BMP #40: Parking Lot #21 (Lee St.) Rain Tank



BMP #40: Parking Lot #21 (Lee St.) Rain Tank

Capital Outlay and Facilities Management
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: M. Webb			Type of BMP: Rain Tank
BMP ID #: 41 (Boisseau St. Parking Lot #36)			Date/Time: 7/17/15 855
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	Y	N	Minimal amount
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?			
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	N	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	

Capital Outlay and Facilities Management
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BMP ID #: 41			Date/Time: 7/17/15 855
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:

Dry.
Depth to bottom of inspection port = 54"
Some sediment on bottom but does not seem very thick because the notches at the bottom end of inspection pipe port are visible.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Lovell — **Date** 7/20/15

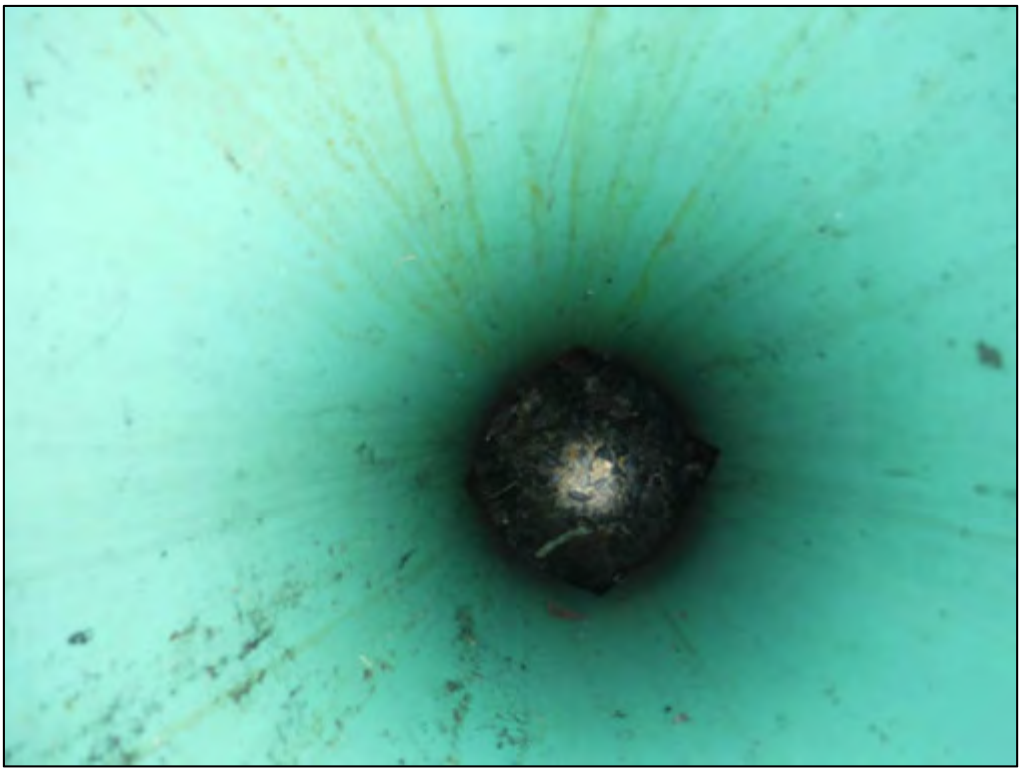
If maintenance is required, provide a time frame for maintenance completion:_____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date:_____

BMP #41: Parking Lot #36 (Boisseau St.) Rain Tank



BMP #41: Parking Lot #36 (Boisseau St.) Rain Tank

Capital Outlay and Facilities Management
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

Underground Detention Systems
(Water Quantity)

Inspection & Maintenance Checklist

Inspector Name: M. Webb			Type of BMP: Rain Tank
BMP ID #: 42 (Boisseau St. Parking Lot #37)			Date/Time: 7/17/15 904
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
I. Internal Storage Area			
A. Sediment present?	Y	N	Minimal amount
B. Trash/debris present?	N	N	
C. Separation of joints, cracks, breaks, or deteriorization of strucuture?			
D. Algal growth present?	N	N	
E. Evidence of seepage, leakage, or rust?	N	N	
F. Evidence of pollutants?	N	N	
Inlet & Outlet Piping			
A. Inspection manhole funtioning properly?	Y	Y	
B. Clogging of inflow pipes?	N	N	
C. Clogging of outflow pipes?	N	N	

Capital Outlay and Facilities Management
PO Box 9414
Virginia State University, VA 23806
Phone: (804)524-3971
Fax: (804)524-5383

BMP ID #: 42			Date/Time: 7/17/15 904
Inspection Finding	**Y/N**	**Maintenance Required Y/N**	**Comments**
D. Obstruction?	N	N	
E. Adequate riprap (If applicable)?	NA	NA	
F. Undercutting at the outlet?	NA	NA	
G. Outlet channel scour?	NA	NA	

Notes:
Dry.
Depth to bottom of inspection port = 60.25"
Not enough sediment to cover bottom of inspection port.

Certification:

If no maintenance is required, certify the following:

"I certify that the inspection is complete and that no action is necessary at this time."

Signature of Inspector Matthew Wolf _____ **Date** 7/20/15 _____

If maintenance is required, provide a time frame for maintenance completion:_____
Upon maintenance completion, re-inspect and certify the following:

"I certify that all recommended maintenance is complete and no additional action is necessary at this time."

Signature of Inspector _____ **Date** _____

Next inspection date:_____

BMP #42: Parking Lot #37 (Boisseau St.) Rain Tank

BMP #42: Parking Lot #37 (Boisseau St.) Rain Tank

Atlas Industrial Services performed maintenance on two Stormfilters on July 17, 2015. For each storm filter, standing water and accumulated sediment was vacumed out of the manhole. Then, the cover to each Stormfilter was removed and the clogged filter media was vacumed out. Once the filter was cleaned out it, was removed from the manhole to be returned to the distributer for refurbishing. Any resdidual water and/or sediment still remaining in the manhole was then vacumed out and a new Stormfilter with clean filter media was installed. The maintenance procedure for each Stormfilter was identical and the following photos show steps of the process.

BMP #22: Howard Hall Quad II Courtyard (Contect Stormfilter 1)
Vacuming out clogged filter media

BMP #22: Howard Hall Quad II Courtyard (Contect Stormfilter 1)

BMP #22: Howard Hall Quad II Courtyard (Contect Stormfilter 1)

BMP #22: Howard Hall Quad II Courtyard (Contect Stormfilter 1)
Removed filter housing

BMP #22: Howard Hall Quad II Courtyard (Contect Stormfilter 1)
Lowering new filter

BMP #23: Howard Hall Quad II Courtyard (Contect Stormfilter 2
Standing water

BMP #23: Howard Hall Quad II Courtyard (Contect Stormfilter 2)

BMP #23: Howard Hall Quad II Courtyard (Contect Stormfilter 2
Removing accumulated sediment

Appendix MCM 6

Matthew Webb

From: Matthew Webb
Sent: Thursday, September 24, 2015 2:58 PM
To: Matthew Webb
Subject: FW: Training Records for MS4 Reporting
Attachments: Spill Training Sign In Sheet.pdf; OPCP SPCC Training.pptx

From: David Weddle [mailto:dweddle@vsu.edu]
Sent: Thursday, September 24, 2015 2:05 PM
To: Amelia Wehunt
Subject: RE: Training Records for MS4 Reporting

I have attached the spill training presentation and the attendance sheet. We also conducted a drill at the time of the training. The spill training covers the ODCP and SPCC as they are both covering similar topics. I will send the 2015 updated hazardous waste training shortly.

From: Amelia Wehunt [mailto:amelia.wehunt@timmons.com]
Sent: Thursday, September 24, 2015 9:56 AM
To: David Weddle <dweddle@vsu.edu>
Subject: Training Records for MS4 Reporting
Importance: High

Hi David,

Would you please send me your power point and training records from last fall? I need them for the MS4 Annual Report.

Thanks for your help,

Amelia

Amelia Wehunt, PE
Project Manager

TIMMONS GROUP | www.timmons.com
1001 Boulders Parkway, Suite 300 | Richmond, VA 23225
Office: 804.200.6544 | Fax: 804.560.1438
Mobile: 804.517.4996 | amelia.wehunt@timmons.com
LinkedIn: www.linkedin.com/in/ameliawehunt
Your Vision Achieved Through Ours

To send me files greater than 20MB **click here.**

VSU Training Attendance Sheet:

Date: November 14, 2014 Time: 1:45-2:45

Topic: ODCP and SPCC

Trainer: David Weddle, Environmental Compliance Officer

Attendees - Print name	Signature
Fred Snyder	
Kenneth Roberts	
Jeremy Jones	
David Weddle	
1:45 - 3:00	
Mark Adams	

ODCP and SPCC Training

VSU Facilities Department

Background

Comply with VADEQ Aboveground Storage Tank Regulations

Aggregate aboveground storage capacity above 25,000 gallons

Tanks under 660 gallons are excluded from the total storage amount

Five aboveground storage tanks with an aggregate capacity of 41,000 gallons

VSU AST Summary

Virginia State University Regulated ASTs

Table 1

Tank Type	Maximum Storage Capacity (gallons)	Contents	Location and Identification Number
Double-Walled Horizontal AST	10,000	# 6 Oil (Bunker oil)	Heating Plant AST-1
Double-Walled Horizontal AST	10,000	# 6 Oil (Bunker oil)	Heating Plant AST-2
Double-Walled Horizontal AST	10,000	# 6 Oil (Bunker oil)	Heating Plant AST-3
Double-Walled Horizontal AST	10,000	# 6 Oil (Bunker oil)	Heating Plant AST-4
Double-Walled Horizontal ConVault AST	1,000	# 2 Oil (Diesel Fuel)	Jones Dining Hall

Heating Plant ASTs

Heating Plant AST Bunker

Fuel Transfer and Inventory Control

- ASTs are equipped with high visibility liquid level gauges and audible overfill alarms
- Filling stations are located in a shed that is locked at all times; spill kits are located in the filling station and in the heating plant
- Fuel delivery checklist is used when filling tanks
- Heating plant staff member present at ALL times during fill up

Fuel Refill Station

Spill Kit

Fuel Oil Delivery Checklist

Fuel Oil Delivery Checklist

Product: _____ **Delivery Date:** _____

Quantity: _____ **Storage Tank No.(s)** _____

Vendor/Transporter Name: _____

Prior to starting the delivery process, verify the following:

1. Material being delivered agrees with the type of fuel needed for that tank and equipment (#6 oil for the heating plant and # 2 oil (Diesel fuel) for Emergency Generators). (must be <0.5% sulfur for #6 oil for the heating plant, must be <0.0015% by weight (<15ppmw) sulfur for the generators.
2. Check the level gage on the tank that is being filled to ensure that there is sufficient capacity in the tank to safely accept the quantity of fuel being delivered.
3. Check flexible hoses for integrity, deterioration or leaks.
4. Check the unloading area for integrity, deterioration or leaks.
5. Check for improper deployment and location of portable/temporary containment devices (i.e. booms to block nearby storm drains)

Tank Inspections

- Tanks are checked daily and official tank inspection reports are conducted weekly

WEEKLY TANK INSPECTION CHECKLIST

Check tanks weekly and fill out the Weekly Inspection Log

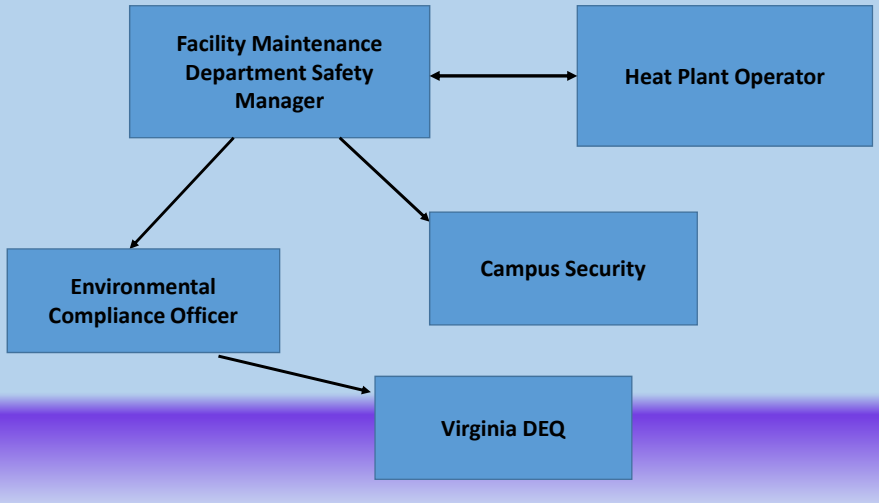
Registration of the Above Ground Fuel Storage Tanks with the DEQ requires that all ASTs be inspected weekly.

AST-1	# 6 oil	AST-5	# 2 diesel
AST-2	# 6 oil	Generator Tank	# 2 diesel
AST-3	# 6 oil		
AST-4	# 6 oil		

1. *Check AST 1-4 and its fuel storage room containment:*
   - Are drip marks apparent? Yes[ ] No[ ]
   - Is there apparent discoloration? Yes[ ] No[ ]
   - Is there any visible corrosion? Yes[ ] No[ ]
   - Are there any visible cracks? Yes[ ] No[ ]
   - Are there any puddles containing material? Yes[ ] No[ ]

2. *Check Containment for The Following:*
   - Are there any visible cracks? Yes[ ] No[ ]
   - Is there any apparent discoloration? Yes[ ] No[ ]
   - Are there puddles containing stored material? Yes[ ] No[ ]
   - Do the tanks show signs of settling? Yes[ ] No[ ]
   - Are there any gaps between the tank and the foundation? Yes[ ] No[ ]
   - Is pipe bowing between supports? Yes[ ] No[ ]
   - Is there evidence of stored material on valves or seals? Yes[ ] No[ ]

Spill Procedures - Notifications



Regulatory Notifications

- Virginia DEQ notified if the spill exceeds 25 gallons
- Notify National Response Center if the spill exceeds 1,000 gallons
- In the case of larger spills, the Environmental Compliance Officer will contact a spill response vendor to assist with mitigation activities (Clean Harbors, Potomac Environmental, etc.)
- Remediation activities will be coordinated by Environmental Compliance Officer in concert with Virginia DEQ for larger spills