

# Work Activity Work Order

## Work Order Information

Activity Type	ROUTINE WORK	Work Order No	20489048
Initiated From	HMMS HWY MAINTENANCE MANAGEMENT	Project No	SWPPPSD21
Problem	H8000 SUPPORT SERVICES	Request Received	7/14/2020
Assigned By	PWSHEN31 SHENTON JR, JOHN	Investigation Due	7/21/2020
Assigned To	PWJETT10 JETT, DERRICK	Investigation Date	7/14/2020
Department	1312SD SOUTHERN DIST/DAVIDSONVILLE	Scheduled Date 1	5/31/2021
Requested By	PWSHEN31 SHENTON JR, JOHN	Scheduled Date 2	
Status	CL	Scheduled Date 3	
Activity	H8062 SAFETY FUNCTIONS & FACILITY IN	Scheduled Date 4	
Priority	H2	Completed Date	5/26/2021
Completed By	PWJETT10 JETT, DERRICK	Time Completed	

## Problem Information

**Problem Details** PERFORM A WET WEATHER INSPECTION QUARTLEY AT EACH DISCHARGE POINT (OUTFALL). WITHIN 30 MINUTES OF ANY PERCIPIATION EVENT WHERE THERE IS A MEASURABLE DISCHARGE. AT LEAST ONE QUARTERLY VISUAL ASSESSMENT MUST CAPTURE SNOWMENT DISCHARGE. IF THERE IS NO DISCHARGE, THEN NOTE "NO DISCHARGE" BUT COMPLETE AND RETAIN DOCUMENTATION. FORM B: MDE QUARTERLY VISUAL MONITORING FORM OUTFALLS: 001 STORMWATER POND BMP OVERFLOW ( BY DOVER RD ) 002 SAND FILTER OVERFLOW ( NORTH SIDE OF FACILTY ADJACENT TO WALMART ) ACTION: FEBRUARY 2020 QUARTERLY WET WEATHER INSPECTION

Address 350 Street CENTRAL AVE W  
 Cross Street Map Book New Map Book  
 Location  
 Subdivision City DAVIDSONVILLE Zip 21035

## Customer Information

Customer Name  
 Address 350 Street CENTRAL AVE W  
 City DAVIDSONVILLE State MD Zip 21035  
 Home Phone ( ) Ext. Second Phone ( ) Ext.  
 Elected/Project  
 E/O Aide Elected Official

## Structure/Equipment Information

Structure/Equipment No US DS No. Of Structures  
 Structure/Equipment Type  
 Address Street  
 Cross Street  
 Area Designator  
 Miss Utility Number  
 Activity H8062 SAFETY FUNCTIONS & FACILITY IN Completed Date 5/26/2021

**Action Taken** MAY 2021 QUARTERLY WET WEATHER INSPECTION

### Quarterly Visual Monitoring Form

Fill out a separate form for each outfall sampled.

<b>Sample Location</b>		1312SD	
<b>Quarter / Year:</b>	2021	<b>Date / Time Collected:</b>	26 May
<b>Date / Time Examined:</b>	10:00		
<b>Qualifying Storm Event?</b>	Yes	<input checked="" type="radio"/> No	<b>Runoff Source:</b>
		<input checked="" type="radio"/> Rainfall	
<b>Collector's Name &amp; Title</b>		Derrick E. Lett	
<b>Examiner's Name &amp; Title</b>		Derrick E. Lett	
Parameter	Parameter Description	Parameter Characteristics	
1. Color	Does the stormwater appear to have any color? Yes <input checked="" type="radio"/> No (Clear)	If Yes, describe: Yellow Brown Red Gray Other:	
2. Clarity	Is the stormwater clear? <input checked="" type="radio"/> Yes                      No	If not clear, which of the following best describes the clarity of the stormwater? Suspended Solids Milky/Cloudy Opaque Other:	
3. Oil Sheen	Can you see a rainbow effect or sheen on the water surface? Yes <input checked="" type="radio"/> No	Which best describes the sheen? Rainbow sheet Floating oil globules Other:	
4. Odor	Does the sample have an odor? Yes <input checked="" type="radio"/> No	If Yes, describe: Chemical Musty Rotten Eggs Sewage Sour Milk Oil/Petroleum Other:	
5. Floating Solids	Is there anything on the surface of the sample? Yes <input checked="" type="radio"/> No	If Yes, describe: Suds Oily Film Garbage Sewage Water Fowl Excrement Other:	
6. Suspended Solids	Is there anything suspended in the sample? <input checked="" type="radio"/> Yes                      No	Describe: Sediments	
<b>***Leave sample undisturbed for 30 minutes.***</b>			
7. Settled Solids	Is there anything settled on the bottom of the sample? <input checked="" type="radio"/> Yes                      No	Describe: (note type, size and material after sample is not disturbed for 30 minutes) Small Dirt/soil Sediments	
8. Foam	Does foam or material form on the top of the sample surface if you shake it? Yes <input checked="" type="radio"/> No	Describe:	
9. If there are any visible indicators of pollution identify (1) where the pollution may come from and (2) any corrective actions taken. <p style="text-align: center;">None</p>			

Stormwater Collector's Signature and Date: *[Signature]* 26 May 21

Stormwater Examiner's Signature and Date: *[Signature]*

Note – Sample should be collected and analyzed in a colorless glass or plastic bottle.

# Record D. Comprehensive Site Inspection Reports

## Stormwater Industrial Facility Inspection Report

General Information			
Facility Name	Davidsonville Yard		
NPDES Tracking No.	Maryland General Discharge Permit 12-SW-2298		
Date of Inspection	June 30, 2020	Start/End Time	800 hrs. / 930 hrs.
Inspector's Name(s)	Joe Shenton		
Inspector's Title(s)	Road Operations Supervisor		
Inspector's Contact Information	350 W. Central Ave Davidsonville MD 21035, (410)222-1933		
Inspector's Qualifications	Leader of Pollution Prevention Team for this facility		
Weather Information			
Weather at time of this inspection?			
<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Fog <input type="checkbox"/> Snow <input type="checkbox"/> High Winds <input type="checkbox"/> Other: _____ Temperature: 85-90°F			
Have any previously unidentified discharges of pollutants occurred since the last inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			
Are there any discharges occurring at the time of inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If yes, describe:			

### Control Measures

	Structural Control Measure	Control Measure is Operating Effectively?	If No, In Need of Maintenance, Repair, or Replacement?	Corrective Action Needed and Notes (identify needed maintenance and repairs, or any failed control measures that need replacement)
1	<b>Storm Water Pond</b> <ul style="list-style-type: none"> <li>Outlet structure damaged?</li> <li>Outlet structure openings clear of debris?</li> <li>Trash or debris?</li> <li>Inflow clear of debris?</li> <li>Storm water by-pass the filter?</li> <li>Erosion (anywhere)?</li> <li>Only grass on the embankment?</li> <li>Dead or diseased vegetation?</li> <li>Animal burrows?</li> <li>Bottom covered with 1 inch or more of sediment, crust, debris?</li> <li>Discoloration or sediment at the outfall?</li> <li>Access clear?</li> </ul>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input checked="" type="checkbox"/> Repair <input type="checkbox"/> Replacement	<ul style="list-style-type: none"> <li>All paperwork is onsite at time of inspection 6/30/2020</li> <li>Animal burrow at outfall, will repair with topsoil, seed and mulch</li> <li>Iron stain from groundwater</li> </ul>

2	Waste Oil Tank System	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	No M&R needed.
3	Salt Barn	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	No M&R needed.
4	Calcium Chloride Tank Containment	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Maintenance <input type="checkbox"/> Repair <input type="checkbox"/> Replacement	No M&R needed.

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Vehicle maintenance material (hydraulic fluids , lubricants, etc.) loading/unloading and storage areas	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Need containment for liquids, oils, etc.
2	Equipment operations and maintenance areas	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
3	Fueling area	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4	Dumpsters and trash cans	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
5	Salt barn	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6	Calcium Chloride tank, containment wall and application area	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7	Dust generation and vehicle tracking	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**Non-Compliance**

Describe any incidents of non-compliance observed and not described above:

**Additional Control Measures**

Describe any additional control measures needed to comply with the permit requirements:

Mulch was installed and rip/rap was installed on backside of Central Garage by loading dock  
New salt barn barrier was installed

**Notes**

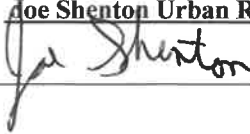
Use this space for any additional notes or observations from the inspection:

**CERTIFICATION STATEMENT**

“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 gathered and evaluated 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.”

Print name and title: Joe Shenton Urban Roads Superintendent

Signature: \_\_\_\_\_



Date: June 23, 2021

# Work Activity Work Order

## Work Order Information

Activity Type	ROUTINE WORK	Work Order No	20489057
Initiated From	HMMS HWY MAINTENANCE MANAGEMENT	Project No	SWPPPSD20
Problem	H8000 SUPPORT SERVICES	Request Received	7/14/2020
Assigned By	PWSHEN31 SHENTON JR, JOHN	Investigation Due	7/21/2020
Assigned To	PWJETT10 JETT, DERRICK	Investigation Date	7/14/2020
Department	1312SD SOUTHERN DIST/DAVIDSONVILLE	Scheduled Date 1	8/31/2020
Requested By	PWSHEN31 SHENTON JR, JOHN	Scheduled Date 2	
Status	CL	Scheduled Date 3	
Activity	H8062 SAFETY FUNCTIONS & FACILITY IN	Scheduled Date 4	
Priority	H2	Completed Date	8/28/2020
Completed By	PWJETT10 JETT, DERRICK	Time Completed	

## Problem Information

Problem Details PROVIDE QUARTERLY SWPPP TRAINING TO STAFF, ROTATING THROUGH ALL FOUR TRAINING PROGRAM SESSIONS AND SUPPLEMENTING WITH ADDITIONAL SWPPP TOPICS OF INTEREST. DOCUMENT ALL TRAINING ON A SIGN-IN SHEET AND SPECIFY THE TRAINING TOPIC IN WO. FORM; ROSTER & NOTICE OF TRAINING

Address	350	Street	CENTRAL AVE W	
Cross Street	BRICK CHURCH RD	Map Book		New Map Book
Location	DAIVDSONVILLE YARD / SWPPP TRAINING MEETING			
Subdivision	DAVIDSONVILLE	City	DAVIDSONVILLE	Zip 21035

## Customer Information

Customer Name	ANON, ANON			
Address	Street			
City		State	MD	Zip
Home Phone	( 410 ) 222-1933	Ext.	Second Phone ( )	Ext.
Elected/Project				
E/O Aide	Elected Official			

## Structure/Equipment Information

Structure/Equipment No	US	DS	No. Of Structures
Structure/Equipment Type			
Address	Street		
Cross Street			
Area Designator			
Miss Utility Number			
Activity	H8062	SAFETY FUNCTIONS & FACILITY IN	Completed Date 8/28/2020

Action Taken AUGUST 2020 QUARTERLY SWPPP TRAINING



Type Code: \_\_\_\_\_

ANNE ARUNDEL COUNTY  
Department of Public Works

**ROSTER & NOTICE OF TRAINING DELIVERED**

PLEASE PRINT OR TYPE. Fill in all applicable information and return to your Bureau Training Coordinator. **IF SAFETY TRAINING, COPY OF THIS RECORD MUST ALSO BE SENT TO THE OFFICE OF THE DEPARTMENT'S SAFETY COORDINATOR AT MS-7201.**

Class Title Sources of stormwater Pollution

(IF SAFETY VIDEO, PLEASE LIST TAPE TITLE AND TAPE NUMBER FROM VIDEO LISTING.)

Class Start Date: 28 Aug 20

Class End Date: 28 Aug 20

Class Hours: 1

Instructor's Name: D. Jett PWS

MCET Course # (if applicable): \_\_\_\_\_

Synopsis of class purpose and content: \_\_\_\_\_

**Employee Name (Last, First, MI) - PLEASE PRINT**

- |                                |                                  |
|--------------------------------|----------------------------------|
| 1. <u>Derrick E Jett</u>       | 17. <u>KEVIN AUSTIN</u>          |
| 2. <u>Spriggs, Chester D</u>   | 18. <u>Charles Richardson Sr</u> |
| 3. <u>Jr. Hunter William</u>   | 19. <u>Eversfield Andrew</u>     |
| 4. <u>Booze Kevin W</u>        | 20. <u>Lee Christopher</u>       |
| 5. <u>Booth, Victoria</u>      | 21. <u>Egley Eric</u>            |
| 6. <u>Nelson, Dylan</u>        | 22. _____                        |
| 7. <u>MATTHEWS Herbert</u>     | 23. _____                        |
| 8. <u>Stiles Jett</u>          | 24. _____                        |
| 9. <u>Hopkins, Duane</u>       | 25. _____                        |
| 10. <u>KRAMOR, ANDREW</u>      | 26. _____                        |
| 11. <u>Mark Taylor</u>         | 27. _____                        |
| 12. <u>Michael Lanham</u>      | 28. _____                        |
| 13. <u>Southwick Charles</u>   | 29. _____                        |
| 14. <u>Schriever George</u>    | 30. _____                        |
| 15. <u>Richardson Chris Jr</u> | 31. _____                        |
| 16. <u>Ryan Wood</u>           | 32. _____                        |

# Work Activity Work Order

## Work Order Information

Activity Type	ROUTINE WORK	Work Order No	20489062
Initiated From	HMMS HWY MAINTENANCE MANAGEMENT	Project No	SWPPPSD20
Problem	H8000 SUPPORT SERVICES	Request Received	7/14/2020
Assigned By	PWSHEN31 SHENTON JR, JOHN	Investigation Due	7/21/2020
Assigned To	PWJETT10 JETT, DERRICK	Investigation Date	7/14/2020
Department	1312SD SOUTHERN DIST/DAVIDSONVILLE	<b>Scheduled Date 1</b>	<b>11/30/2020</b>
Requested By	PWSHEN31 SHENTON JR, JOHN	Scheduled Date 2	
Status	PR	Scheduled Date 3	
Activity	<b>H8062 SAFETY FUNCTIONS &amp; FACILITY IN</b>	Scheduled Date 4	
Priority	H2	Completed Date	
Completed By		Time Completed	

## Problem Information

**Problem Details** PROVIDE QUARTERLY SWPPP TRAINING TO STAFF, ROTATING THROUGH ALL FOUR TRAINING PROGRAM SESSIONS AND SUPPLEMENTING WITH ADDITIONAL SWPPP TOPICS OF INTEREST. DOCUMENT ALL TRAINING ON A SIGN-IN SHEET AND SPECIFY THE TRAINING TOPIC IN WO. FORM; ROSTER & NOTICE OF TRAINING

Address	350	Street	CENTRAL AVE W	
Cross Street	BEARDS POINT RD	Map Book		New Map Book
Location	DAVISONVILLE YARD			
Subdivision	DAVIDSONVILLE	City	DAVIDSONVILLE	Zip 21035

## Customer Information

Customer Name	,	Street		State	MD	Zip	
Address							
City							
Home Phone	( )	Ext.		Second Phone	( )	Ext.	
Elected/Project							
E/O Aide				Elected Official			

## Structure/Equipment Information

Structure/Equipment No	US	DS	No. Of Structures
Structure/Equipment Type			
Address		Street	
Cross Street			
Area Designator			
Miss Utility Number			
Activity	H8062	SAFETY FUNCTIONS & FACILITY IN	Completed Date <u>11/18/20</u>

**Action Taken** NOVEMBER 2020 QUARTERLY SWPPP TRAINING





Type Code: \_\_\_\_\_

ANNE ARUNDEL COUNTY  
Department of Public Works

ROSTER & NOTICE OF TRAINING DELIVERED

PLEASE PRINT OR TYPE. Fill in all applicable information and return to your Bureau Training Coordinator. **IF SAFETY TRAINING, COPY OF THIS RECORD MUST ALSO BE SENT TO THE OFFICE OF THE DEPARTMENT'S SAFETY COORDINATOR AT MS-7201.**

Class Title Salt Management and proper cleaning

(IF SAFETY VIDEO, PLEASE LIST TAPE TITLE AND TAPE NUMBER FROM VIDEO LISTING.)

Class Start Date: 18 Nov 20

Class End Date: 18 Nov 20

Class Hours: 1

Instructor's Name: D. Jett RMS

MCET Course # (if applicable): \_\_\_\_\_

Synopsis of class purpose and content: \_\_\_\_\_

Employee Name (Last, First, MI) - PLEASE PRINT

- |                                |                                 |
|--------------------------------|---------------------------------|
| 1. <u>Derrick E Jett</u>       | 17. <u>KEPILLY AUSTIN</u>       |
| 2. <u>Spang, Chester D</u>     | 18. <u>CAPLES RICHARDSON SR</u> |
| 3. <u>Jr Hunter William</u>    | 19. <u>Eversfield Andrew</u>    |
| 4. <u>Booze Kevin W</u>        | 20. <u>Lee Christopher</u>      |
| 5. <u>Booth, Victoria</u>      | 21. <u>Eggley Erica</u>         |
| 6. <u>Nelson, Dylan</u>        | 22. _____                       |
| 7. <u>MATTHEWS HERBERT</u>     | 23. _____                       |
| 8. <u>Stiles Jett</u>          | 24. _____                       |
| 9. <u>Hopkins, CUMY</u>        | 25. _____                       |
| 10. <u>RIZAMOR, ANDREW</u>     | 26. _____                       |
| 11. <u>Mark Taylor</u>         | 27. _____                       |
| 12. <u>Michael Lanham</u>      | 28. _____                       |
| 13. <u>Southwick Charles</u>   | 29. _____                       |
| 14. <u>Schriever George</u>    | 30. _____                       |
| 15. <u>Richardson Chris Jr</u> | 31. _____                       |
| 16. <u>Ryan Wood</u>           | 32. _____                       |

# Work Activity Work Order

## Work Order Information

Activity Type	ROUTINE WORK	Work Order No	20489072
Initiated From	HMMS HWY MAINTENANCE MANAGEMENT	Project No	SWPPPSD21
Problem	H8000 SUPPORT SERVICES	Request Received	7/14/2020
Assigned By	PWSHEN31 SHENTON JR, JOHN	Investigation Due	7/21/2020
Assigned To	PWJETT10 JETT, DERRICK	Investigation Date	7/14/2020
Department	1312SD SOUTHERN DIST/DAVIDSONVILLE	Scheduled Date 1	2/28/2021
Requested By	PWSHEN31 SHENTON JR, JOHN	Scheduled Date 2	
Status	CL	Scheduled Date 3	
Activity	H8062 SAFETY FUNCTIONS & FACILITY IN	Scheduled Date 4	
Priority	H2	Completed Date	2/17/2021
Completed By	PWJETT10 JETT, DERRICK	Time Completed	

## Problem Information

Problem Details PROVIDE QUARTERLY SWPPP TRAINING TO STAFF, ROTATING THROUGH ALL FOUR TRAINING PROGRAM SESSION AND SUPPLEMENTING WITH ADDITIONAL SWPPP TOPICS OF INTEREST, DOCUMENT ALL TRAINING ON A SIGN IN SHEET AND SPECIFY THE TRAINING TOPIC IN W.O. FORM, ROSTER & NOTICE OF TRAINING

Address 350 Street CENTRAL AVE W  
Cross Street Map Book New Map Book  
Location  
Subdivision City DAVIDSONVILLE Zip 21035

## Customer Information

Customer Name  
Address 350 Street CENTRAL AVE W  
City DAVIDSONVILLE State MD Zip 21035  
Home Phone ( ) Ext. Second Phone ( ) Ext.  
Elected/Project  
E/O Aide Elected Official

## Structure/Equipment Information

Structure/Equipment No US DS No. Of Structures  
Structure/Equipment Type  
Address Street  
Cross Street  
Area Designator  
Miss Utility Number  
Activity H8062 SAFETY FUNCTIONS & FACILITY IN Completed Date 2/17/2021

Action Taken FEBRUARY 2021 QUARTERLY SWPPP TRAINING  
SW TRAINING - PROPER CLEANING AND MAINT. TO SNOW EQUIP DURING POST SNOW EVENT  
DJETT 17 FEB21



Type Code: \_\_\_\_\_

**ANNE ARUNDEL COUNTY  
Department of Public Works**

***ROSTER & NOTICE OF TRAINING DELIVERED***

**PLEASE PRINT OR TYPE. Fill in all applicable information and return to your Bureau Training Coordinator. IF SAFETY TRAINING, COPY OF THIS RECORD MUST ALSO BE SENT TO THE OFFICE OF THE DEPARTMENT'S SAFETY COORDINATOR AT MS-7201.**

Class Title Equip. Maint. During Post Snow Events

(IF SAFETY VIDEO, PLEASE LIST TAPE TITLE AND TAPE NUMBER FROM VIDEO LISTING.)

Class Start Date: 17 Feb 21

Class End Date: 17 Feb 21

Class Hours: 1hr

Instructor's Name: D. Jett

MCET Course # (if applicable): \_\_\_\_\_

Synopsis of class purpose and content: \_\_\_\_\_

**Employee Name (Last, First, MI) - PLEASE PRINT**

- |                                     |                               |
|-------------------------------------|-------------------------------|
| 1. <u>Antonia Booth</u>             | 17. <u>Reed Sabrina</u>       |
| 2. <u>Hopkins, SWAYNE</u>           | 18. <u>Ryan wood</u>          |
| 3. <u>KRAMOIL, ANDREW</u>           | 19. <u>M. Taylor</u>          |
| 4. <u>Richardson, Richardson Sr</u> | 20. <u>Darryl Appleby</u>     |
| 5. <u>Nelson, Dylan</u>             | 21. <u>Jeff Stiles</u>        |
| 6. <u>Richardson Chris Jr</u>       | 22. <u>Spriggs, Chester D</u> |
| 7. <u>DERRICK TR GROSS</u>          | 23. _____                     |
| 8. <u>Eppley</u>                    | 24. _____                     |
| 9. <u>Lee Chris</u>                 | 25. _____                     |
| 10. <u>Southwick Charles</u>        | 26. _____                     |
| 11. <u>Duncan Craig</u>             | 27. _____                     |
| 12. <u>Everfield Andrew</u>         | 28. _____                     |
| 13. <u>MATTHEWS Herbert</u>         | 29. _____                     |
| 14. <u>Jr Hunter-William</u>        | 30. _____                     |
| 15. <u>Schriefer George</u>         | 31. _____                     |
| 16. <u>Geoff Alleman</u>            | 32. _____                     |

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# Work Activity Work Order

## Work Order Information

Activity Type	ROUTINE WORK	Work Order No	20489069
Initiated From	HMMS HWY MAINTENANCE MANAGEMENT	Project No	SWPPPSD21
Problem	H8000 SUPPORT SERVICES	Request Received	7/14/2020
Assigned By	PWSHEN31 SHENTON JR, JOHN	Investigation Due	7/21/2020
Assigned To	PWJETT10 JETT, DERRICK	Investigation Date	7/14/2020
Department	1312SD SOUTHERN DIST/DAVIDSONVILLE	Scheduled Date 1	5/31/2021
Requested By	PWSHEN31 SHENTON JR, JOHN	Scheduled Date 2	
Status	PR	Scheduled Date 3	
Activity	H8062 SAFETY FUNCTIONS & FACILITY IN	Scheduled Date 4	
Priority	H2	Completed Date	
Completed By		Time Completed	

## Problem Information

**Problem Details** PROVIDE QUARTERLY SWPPP TRAINING TO STAFF, ROTATING THROUGH ALL FOUR TRAINING PROGRAM SESSIONS AND SUPPLEMENTING WITH ADDITIONAL SWPPP TOPICS OF INTEREST. DOCUMENT ALL TRAINING ON A SIGN-IN SHEET AND SPECIFY THE TRAINING TOPIC IN WO. FORM; ROSTER & NOTICE OF TRAINING

Address 350 Street CENTRAL AVE W  
Cross Street BEARDS POINT RD Map Book New Map Book  
Location DAVIDSONVILLE YARD  
ubdivision DAVIDSONVILLE City DAVIDSONVILLE Zip 21035

## Customer Information

Customer Name ,  
Address 350 Street CENTRAL AVE W  
City DAVIDSONVILLE State MD Zip 21035  
Home Phone ( ) Ext. Second Phone ( ) Ext.  
Elected/Project Elected Official  
E/O Aide

## Structure/Equipment Information

Structure/Equipment No US DS No. Of Structures  
Structure/Equipment Type  
Address Street  
Cross Street  
Area Designator  
Miss Utility Number  
Activity H8062 SAFETY FUNCTIONS & FACILITY IN Completed Date 31 May 21

**Action Taken** MAY 2021 QUARTERLY SWPPP TRAINING



Type Code: \_\_\_\_\_

ANNE ARUNDEL COUNTY  
Department of Public Works

**ROSTER & NOTICE OF TRAINING DELIVERED**

PLEASE PRINT OR TYPE. Fill in all applicable information and return to your Bureau Training Coordinator. **IF SAFETY TRAINING, COPY OF THIS RECORD MUST ALSO BE SENT TO THE OFFICE OF THE DEPARTMENT'S SAFETY COORDINATOR AT MS-7201.**

Class Title Asphalt Equipment Maintenance

(IF SAFETY VIDEO, PLEASE LIST TAPE TITLE AND TAPE NUMBER FROM VIDEO LISTING.)

Class Start Date: 31 May 21

Class End Date: 31 May 21

Class Hours: 1 hr

Instructor's Name: D. Jett

MCET Course # (if applicable): \_\_\_\_\_

Synopsis of class purpose and content: \_\_\_\_\_

**Employee Name (Last, First, MI) - PLEASE PRINT**

- |                                     |                                |
|-------------------------------------|--------------------------------|
| 1. <u>Antonia Booth</u>             | 17. <u>Reed Sabrina</u>        |
| 2. <u>Hopkins, DWAYNE</u>           | 18. <u>Ryan wood</u>           |
| 3. <u>KRAMOR, ANGELO</u>            | 19. <u>M. Taylor</u>           |
| 4. <u>Christopher Richardson Sr</u> | 20. <u>Darryl Appleby</u>      |
| 5. <u>Nelson, Dylan</u>             | 21. <u>Jeff Stiles</u>         |
| 6. <u>Richardson Chris Jr</u>       | 22. <u>Springgs, Chester D</u> |
| 7. <u>DERRICK TO GROSS</u>          | 23. _____                      |
| 8. <u>Eppley</u>                    | 24. _____                      |
| 9. <u>Lee Chris</u>                 | 25. _____                      |
| 10. <u>Southwick Charles</u>        | 26. _____                      |
| 11. <u>Duncan Craig</u>             | 27. _____                      |
| 12. <u>EVERSFIELD Andrew</u>        | 28. _____                      |
| 13. <u>MATTHEWS Herbert</u>         | 29. _____                      |
| 14. <u>Jr Hunter William</u>        | 30. _____                      |
| 15. <u>Schriefer George</u>         | 31. _____                      |
| 16. <u>Geoff Alleman</u>            | 32. _____                      |

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