## Form C. Comprehensive Site Inspection Reports

**Stormwater Industrial Facility Inspection Report** 

General Information			
Facility Name	Dover Road Yard		
NPDES Tracking No.	Maryland General Discharge Permit 12-SW: 1176		
Date of Inspection	07-09-20 Start/End Time 1000-1200		
Inspector's Name(s)	Jim Small/Lenny Clower Rick Davis Dave Ingrassia		
Inspector's Title(s)	Superintendent/ROS Chief BOH RMS		
Inspector's Contact Information	410 222-6120		
Inspector's Qualifications	SWPPP Prevention Team Northern District		
Weather Information			
Weather at time of this inspection?  ◆ Clear □Cloudy □ Rain □ Sleet □ Fog □ Snow □ High Winds □ Other: Temperature: 100 Degrees			
Have any previously unidentified discharges of pollutants occurred since the last inspection? ☐Yes ◆No If yes, describe:			
Are there any discharges occurring at the time of inspection? □Yes ◆No If yes, describe:			

## Control Measures

	Structural Control	Control	If No, In Need of	Corrective Action Needed and Notes
	Measure	Measure is	Maintenance,	(identify needed maintenance and repairs, or
		Operating	Repair, or	any failed control measures that need
		Effectively?	Replacement?	replacement)
1	Stormwater Pond	♦Yes □No	☐ Maintenance	Provide plans for both SWM ponds.
	Outlet structure		☐ Repair	Pond-1 (rear) monitor water level and dewater
	damaged?		☐ Replacement	and inspect outfall fall barrel
	<ul> <li>Outlet structure</li> </ul>			
	openings clear of			
	debris?			
	<ul><li>Trash or debris?</li></ul>			
	Inflow clear of			
	debris?			
	<ul> <li>Storm water by-pass the pond?</li> </ul>			
	• Erosion (anywhere)?			
	Only grass on the			
	embankment?			
	Dead or diseased			
	vegetation?			
	<ul><li>Animal burrows?</li></ul>			
	<ul> <li>Sediment more than</li> </ul>			
	one foot deep?			
	<ul> <li>Discoloration or</li> </ul>			
	sediment at the			
	outfall?			
1	<ul> <li>Access clear?</li> </ul>		1	

	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)
2	Surface Sand Filter  Outlet structure damaged?  Outlet structure openings clear of debris?  Trash or debris?  Inflow clear of debris?  Storm water by-pass the pond?  Erosion (anywhere)?  Only grass on the embankment?  Dead or diseased vegetation?  Animal burrows?  Sediment more than one foot deep?  Discoloration or sediment at the outfall?  Access clear?	◆Yes □No	☐ Maintenance ☐ Repair ☐ Replacement	Pond -2 (front) clean all debris from with in the outfall structure.
3	Waste Oil Tank System	◆Yes □No	<ul><li>□ Maintenance</li><li>□ Repair</li><li>□ Replacement</li></ul>	Removed from site.
4	Salt Barn	◆Yes □No	<ul><li>☐ Maintenance</li><li>☐ Repair</li><li>☐ Replacement</li></ul>	Salt Barn, repair broken truss brace.
5	Calcium Chloride Tank Containment	♦Yes □No	☐ Maintenance ☐ Repair ☐ Replacement	Provide now nylon straps for calcium chloride tanks

	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	♦Yes □No □ N/A	□Yes □No	Ensure that all oil container are place on approved spill catchment pads Place all propane tanks within an approved storage unit. Replace fire hazed sign on existing propane storage tank unit.
2	Equipment operations and maintenance areas	♦Yes □No □ N/A	□Yes □No	none

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
3	Fueling area	♦Yes □No □ N/A	♦Yes □No	None
4	Dumpsters and trash cans	◆Yes □No □ N/A	♦Yes □No	None
5	Salt barn	♦Yes □No □ N/A	♦Yes □No	Salt Barn, repair broken truss brace.
6	Calcium Chloride tank, containment wall and application area	◆Yes □No □ N/A	♦Yes □No	Provide now nylon straps for calcium chloride tanks
7	Dust generation and vehicle tracking	◆Yes □No □ N/A	♦Yes □No	None

**Non-Compliance** Describe any incidents of non-compliance observed and not described above: No issues out of compliance **Additional Control Measures** Describe any additional control measures needed to comply with the permit requirements: **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:	
Signature:	Date: