Quarterly Visual Monitoring Form

		riii out a separate torm	for each outfall sampled.					
Sample Location	n Pono	1 1 500/	(4					
Quarter / Year:	2 20	Date / Time Collected:	: 4/16 927 Date / Time Examined: 4/16 10					
Qualifying Storr	m Event?	Yes No	Runoff Source: Rainfall Snowmelt					
Collector's Name & Title		m ben	sh. E.T.					
Examiner's Name & Title		mbou	ish E.T.					
Parameter	Parar	neter Description	Parameter Characteristics					
1. Color	Does the sto	ormwater appear to have	If Yes, describe: Yellow Brown Red Gray Other:					
2. Clarity	Is the storm	water clear?	If not clear, which of the following best describes the clarity of the stormwater? Suspended Solids Milky/Cloudy Opaque Other:					
3. Oil Sheen	sheen on the	a rainbow effect or water surface?	Which best describes the sheen? Rainbow sheet Floating oil globules Other:					
4. Odor	Does the san	nple have an odor?	If Yes, describe: Chemical Musty Rotten Eggs Sewage Sour Milk Oil/Petroleum Other:					
5. Floating Solids	the sample?	ning on the surface of	If Yes, describe: Suds Oily Film Garbage Sewage Water Fowl Excrement Other:					
5. Suspended Solids	Is there anyth sample? Yes	ing suspended in the	Describe:					
	was	Leave sample undisturi	bed for 30 minutes ****					
7. Settled Solids		ing settled on the	Describe: (note type, size and material after sample is not disturbed for 30 minutes)					
3. Foam	top of the sam shake it?	material form on the uple surface if you	Describe:					
. If there are any any corrective a	Yes visible indicated indi	tors of pollution identif	ly (1) where the pollution may come from and (2)					

. 1	1 1.1100
Stormwater Collector's Signature and Date:	4 416170
Stormwater Examiner's Signature and Date:	d- 1/16/20
Note - Sample should be collected and a	favzed in a colorlass glass or plastic hottle

Quarterly Visual Monitoring Form Fill out a separate form for each outfall sampled.

	Sample Location			1							
	•	Pano	1	gudle	7						
	Quarter / Year:	2 20	Date / Time	Collected:	4/16 917	Date / Time Exam	nined:	4/16 10,			
	Qualifying Storm	Event?	Yes"	No	Runoff Source	e: Rainfall>	Sn	owmelt			
	Collector's			in Lou							
CONTRACT	Name & Title Examiner's	 		pr con	rui r						
	Name & Title			m la	nolos Eit.						
_	Parameter		neter Descri	THE RESERVE OF THE PERSON NAMED IN	eristics						
1.	Color	Does the sto any color? Yes	ormwater app	ear to have (Clear)	If Yes, describ	e: Yellow Brow	n Red	Gray			
2.	Clarity	Is the storm	vater clear?	No	clarity of the st	ich of the following ormwater? olids Milky/Cloudy					
3.	Oll Sheen	sheen on the Yes		e? No	Which best de	scribes the sheen? Floating oil glob					
4.	Odor	Does the san	nple have an	odor?	If Yes, describe Sewage So Other:	e: Chemical Mus ur Milk Oil/Petrol		ten Eggs			
6 .	Floating Solids	Is there anyth the sample? Yes		NO NO	If Yes, describe Sewage Wa Other:	e: Suds Oily F ter Fowl Excremen		Sarbage			
6.	Suspended Solids	is there anyth sample? Yes	ing suspende	n the	Describe:						
Deboels		tinini	Leave sampl	le undisturi	bed for 30 minu	ries. this					
7.		is there anyth bottom of the	sample?			type, size and mat for 30 minutes)	erial afte	r sample			
		Yes	(N6		58					
8.	Form	Does foam or top of the sam shake it?			Describe:						
A.	If there are any	Yes	tors of notice	No identif	h (4) whom Ah	pollution may co	ama for	n and (6)			
-	one competition	Alara Asian	rais ai haila	uvii luciilii	A (1) miles tu	s ponution may co	ome troi	n and (2)			

any corrective actions taken.

	110/0
Stormwater Collector's Signature and Date:	40 14116/20
Stormwater Examiner's Signature and Date:	W 12/11/12-0
Note - Sample should be collect	ted and analyted in doubtless along or plantic hattle

Quarterly Visual Monitoring Form Fill out a separate form for each outfall sampled.

	Sample Location									
		n B+0	Area		Sudley					
	Quarter / Year:	2120	Date / T	ime Collected	: 4/16 905 Date / Time Examined: 4/16 18					
	Qualifying Storm	n Event?	Yes '	No	Runoff Source: Rainfail Snowmelt					
	Collector's			4/ 1	Training Showmen					
drawn	Name & Title			Mbunsh	in Loudi ET					
	Examiner's Name & Title									
600	Parameter	Paran	neter Des	cription	Parameter Characteristics					
1	Color	any color?	Does the stormwater appear to have If Yes, describe: Yellow Brown							
		Yes		No (Clear)						
2.	. Clarity	Is the stormwater clear?			If not clear, which of the following best describes the clarity of the stormwater?					
	,	(Fee		No	Suspended Solids Milky/Cloudy Opaque Other:					
3.	Oil Sheen	Can you see sheen on the Yes	a rainbov water su	reffect or	Which best describes the sheen? Rainbow sheet Floating oil globules Other:					
		Does the san	nole have							
4.	Odor	Yes		No	If Yes, describe: Chemical Musty Rotten Eggs Sewage Sour Milk Oil/Petroleum Other:					
5.	Floating Solids	Is there anyth the sample? Yes	ing on the	surface of	If Yes, describe: Suds Oily Film Garbage Sewage Water Fowl Excrement Other:					
6.	Suspended Solids	Is there anyth sample?	ing suspe	nded in the	Describe:					
	Conds	Yes		No						
Chick Co.		100	Leave sai	nple undistur	bed for 30 minutes.***					
7.	Settled Solids	Is there anythic bottom of the	ing settled	on the	Describe: (note type, size and material after sample is not disturbed for 30 minutes)					
		Yes		No						
3.	Foam	Does foam or top of the sam shake it?		orm on the	Describe:					
		Yes		No						
	If there are any	visible indicat	ors of po	dution identif	y (1) where the pollution may come from and (2)					

			1/	10	1		
Stormwater Collector's Signature and Date:		l	111	61	7	0	
Stormwater Examiner's Signature and Date:		/	1	110	7	La	
Note - Sample should be collected and analyzed	in	cole	ne.	s gi	ass c	or plastic bottle).