Anne Arundel County Department of Public Works

Work Activity Work Order

1 Page 5/15/2020

Request Received 8/12/2019

11:36

19435450

5/12/2020

SWPPPSD20

Nork Order Information

Activity Type Initiated From

Requested By

Completed By

Problem

Status

Activity

Priority

ROUTINE WORK

HMMS HWY MAINTENANCE MANAGEMENT

H8000 SUPPORT SERVICES

Assigned By PWSHEN31 Assigned To PWJETT10 Department

SHENTON JR, JOHN JETT, DERRICK 1312SD SOUTHERN DIST/DAVIDSONVILLE

SHENTON JR, JOHN

PWSHEN31

PR H8062

SAFETY FUNCTIONS & FACILITY IN

H₂

Scheduled Date 1 Scheduled Date 2 Scheduled Date 3 Scheduled Date 4 Completed Date Time Completed

Work Order No.

Investigation Due

Investigation Date

Project No

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) 2020 QUARTERLY WET WEATHER INSPECTION

Address

350

Street CENTRAL AVE W

Map Book

New Map Book

Location

Subdivision

Cross Street

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

DS

No. Of Structures

Structure/Equipment Type

Address

Street

Cross Street

Area Designator Miss Utility Number

Activity

H8062

SAFETY FUNCTIONS & FACILITY IN

Completed Date /2 116/

Action Taken MAY 2020 QUARTERLY WET WEATHER INSPECTION

Quarterly Visual Monitoring Form

			riii out a s	eparate form to	or each outrail s	arripie	u.		
Sample Location		Pavidsonville Yd							
Quarter / Year:				ne Collected:	12 May 20	Date	/ Time Examin	ed:	1100 WS
Qualifying Storm		Event?	Yes	No	Runoff Source	ce:	Rainfall	Sno	owmelt
Collector's Name & Title		Perrick E Jett							
	xaminer's ame & Title	ROS Maint. Sup.							
Parameter		Parameter Description			Parameter Characteristics				
1.	Color	Does the stormwater appear to have any color? Yes No (Clear)			If Yes, describe: Yellow Brown Red Gray Other:				
2.	Clarity	Is the stormwater clear?			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 sheen on th Yes	e water su		Which best describes the sheen? Rainbow sheet Floating oil globules Other:				
4.	Odor	Does the sa	•	an odor?	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 No			If Yes, describe: Suds Oily Film Garbage Sewage Water Fowl Excrement Other:				
6. Suspended Solids		Is there any sample? Yes		ended in the	Describe:				
Leave sample undisturbed for 30 minutes.									
7.	Settled Solids	Solids Is there anything settled on the bottom of the sample? Yes			Describe: (note type, size and material after sample is not disturbed for 30 minutes)				
8.	Foam	top of the sa shake it? Yes	ample surfa	No	Describe:				
9.	If there are any any corrective a			pollu tio n iden	tify (1) where t	the po	llution may co	ome fro	om and (2)

Stormwater Collector's Signature and Date: Stormwater Examiner's Signature and Date: 12 May Note - Sample should be collected and analyzed in a colorless glass or plastic bottle.