NPDES PERMIT NO. MDR

Effective Date:

Part I. Applicability

December 1, 2002 Expiration Date:

November 30, 2007

The state of the s	
Géneral Intermation	
Facility Name	Anne Arundel County Utelities Operation Custo
NPDES Tracking No.	Not Applicable
Date of Inspection	6 92 21 Start/End Time 745 - 855
Inspector's Name(s)	Clis 12 2 and I am Day
Inspector's Title(s)	1 Historia
Inspector's Contact Information	410 22 2 8443
Inspector's Qualifications	NPAES COLO
Weather Intormation	restance inspector.
Weather at time of this insp Winds @ Other:	Dection? © Clear © Cloudy © Rain © Sleet © Fog © Snow © High Temperature:
Have any previously unider No If yes, describe:	ntified discharges of pollutants occurred since the last inspection?

Are there any discharges occurring at the time of inspection? Yes No If yes, describe:

	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	Regenerative Stormwater Conveyance Sediment Pools	②Yes√ ②No	Maintenance Repair	
2	Regenerative Stormwater Conveyance -Swales		Maintenance Repair Replacement	
3	Regenerative Stormwater Conveyance - Sediment Pools		Maintenance Repair C Replacement	
4	Infiltration Trenches - Pretreatment Manholes		Maintenance Repair Replacement	
	Areas of Indu		Maintenance s or Activities Ex	posed to Stormwater Non-Compliance

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Bulk Materials Storage Building	TYes TNo TN/A	□Yes □No	=
2	Waste Oil and Antifreeze Storage	Yes QNo QN/A	Yes CINo	
3	Maintenance and Repair Shop	✓Yes □No □ N/A	Yes QNo	
4	Vehicle and Equipment Storage	✓Yes □No □ N/A	Ves INo	
5	Waste handling and disposal areas	Yes QNo Q N/A	Yes QNo	
6	Spoils Area	DYes □No □ N/A	√Yes □No	
7	Vehicle Tracking	Yes ONO N/A	✓Yes □No	
	Non-stormwater/ Illicit	Yes QNo Q N/A	√Yes □No	
8	Other:	√aYes □No □ N/A	Ves QNo	
9		= 3		

nun

Additional Control Measures

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

Don

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: CHIMA PONCKWUGHA
Signature: Date: S

NPDES PERMIT NO. MDR

Effective Date:

December 1, 2002 Expiration Date:

November 30, 2007

Part I. Applicability.

General Information	
Facility Name	Anne Arrendel Courte Utilities Board: Cont
NPDES Tracking No.	Not Applicable Courty Utelities Operation Cente
Date of Inspection	3-18-21 Start/End Time (30 - 0.25)
Inspector's Name(s)	Chian & D. D. C. C.
Inspector's Title(s)	Utilities Engineer II
Inspector's Contact Information	410 222 81413
Inspector's Qualifications	NPPES Certified Inspector
vvillus @ Other:	ection? © Clear © Cloudy © Rain © Sleet © Fog © Snow © High Temperature:
Have any previously uniden No If yes, describe:	tified discharges of pollutants occurred since the last inspection? ②Yes

Are there any discharges occurring at the time of inspection?

Yes No If yes, describe:

	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 contro measures that need replacement)
1	Regenerative Stormwater Conveyance Sediment Pools	Yes No	Maintenance Repair Replacement	
2	Regenerative Stormwater Conveyance -Swales	©Yes ®DNo	Maintenance Repair Replacement	
3	Regenerative Stormwater Conveyance - Sediment Pools	©Yes ©No	Maintenance Repair Replacement	
4	Infiltration Trenches - Pretreatment Manholes	Yes No	Maintenance Repair Replacement	
	Areas of Indus		Maintenance s or Activities Ex	posed to Stormwater Non-Compliance

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Bulk Materials Storage Building	GYes QNo QNA	□Yes □No	
2	Waste Oil and Antifreeze Storage	OYes ONO ONA	DYes DNo	`
3	Maintenance and Repair Shop	CYES ONO ONA	Yes QNo	
4	Vehicle and Equipment Storage	GYES GNO G N/A	Tyes TNo	
5	Waste handling and disposal areas	ØYes □No □ N/A	□Yes □No	
6	Spoils Area	□Yes □No □ N/A	QYes QNo	
7	Vehicle Tracking	□Yes □No □ N/A	Yes 🗆 No	
8	Non-stormwater/ Illicit Connections	□Yes □No □ N/A	☐Yes ☐No	15
9	Other:	□Yes □No □ N/A	☐Yes ☐No	-

Additional Control Measures

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

Wenc

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: CHIMA P. ORUKWUGHA
Signature: Date:

NPDES PERMIT NO. MDR

Effective Date: Part I. Applicability.

December 1, 2002 Expiration Date:

November 30, 2007

General Information	
Facility Name	Anne Arundel County Utilities Operation Counter
NPDES Tracking No.	Not Applicable
Date of Inspection	12/14/20 Start/End Time 840 9/15
inspector's Name(s)	Chima P. Onukwiglia
Inspector's Title(s)	
Inspector's Contact Information	211-6-7
Inspector's Qualifications	all acc
Weather Information	mapeter.
Weather at time of this insp Winds @ Other:	pection? © Clear © Cloudy © Rain © Sleet © Fog © Snow © High Temperature: 396
Have any previously unider	tified discharges of pollutants occurred since the last inspection?

Are there any discharges occurring at the time of inspection?

Yes No If yes, describe:

	Structural Control Measure	Gontrol Measure is Operating Effectively?	Maintenance.	Corrective Action Needed and Notes (identify needed maintenance and repairs, or any failed control measures that need replacement)
1	Regenerative Stormwater Conveyance Sediment Pools	②Yes ②No	Maintenance Repair Replacement	
2	Regenerative Stormwater Conveyance -Swales	⑤Yes ⑥No	Maintenance Repair Replacement	
3	Regenerative Stormwater Conveyance - Sediment Pools		Maintenance Repair	
4	Infiltration Trenches - Pretreatment Manholes		Maintenance Repair Replacement	
	Areas of Indu		Maintenance s or Activities Ex	posed to Stormwater Non-Compliance

	ArealActivity	Inspected?	Controls Adequate (appropriate, effective, and operating)? Yes No	Corrective Action Needed and Notes
1	Bulk Materials Storage Building	√yes □No □ N/A		
2	Waste Oil and Antifreeze Storage	es 🗆 No 🚨 N/A	Ves DNo	
3	Maintenance and Repair Shop	Yes QNo Q N/A	■Yes □No	
4	Vehicle and Equipment Storage	es ONo ONA	⊠Yes □No	
5	Waste handling and disposal areas	Yes QNo Q N/A	Yes QNo	
6	Spoils Area	√Ves □No □ N/A	Yes 🗆 No	÷
7	Vehicle Tracking	□Ves □No □ N/A	Yes QNo	
8	Non-stormwater/ Illicit Connections	Yes □No □ N/A	D Yes □No	¥
9	Other: Truck Wash area	TYES NO NA	Dyes QNo	·

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Additional Control Measures

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

hen

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: CHIMA F. ONCALMUGHA, Heltilies Engineer II
Signature: Date: 12/14/20

NPDES PERMIT NO. MDR

Effective Date:

December 1, 2002 Expiration Date:

November 30, 2007

Part I. Applic	ability.			•
General Internation		The same of the sa		
Facility Name	A	nne Arounde	DC= & 14+ 1.	A D. O
NPDES Trackin	g No. N	ot Applicable	x tourng Muelle	y Operation le
Date of Inspecti	on 9		Charter 1 7	1 7/2 - 63/
Inspector's Nan		7000	Start/End Time	
Inspector's Title		hime r. Uni	ukwing ha Sr.	
Inspector's Con		Whiles E	nginter II	
Information		102228	403	
inspector's Qua		PDES COH	thind lase	
Weather Informa	lion		A 11/2/21	ector
weather at time Winds @ Other:	of this inspection	on? @ Clear @Clo	oudy @ Rain @ Sleet @	D Fog of Snow of His
winds ou Other:				□ Fog ⓓ□ Snow ⓓ Hig Temperature:
lave any previou	ISIV unidentifie	d dicabarras of	lutants occurred since th	
re there any disc			2.00 32119), 4000/198,
Structural Control	Control Measure is Operating	If No; In Need of Maintenance	Corrective Action N	Needed and Notes (identify
Structural	Control Measure is	If No in Need of Maintenance, Repair or	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative	Control Measure is Operating Effectively?	If No; In Need of Maintenance	Corrective Action N	
Structural Control Measure Regenerative Stormwater	Control Measure is Operating Effectively?	If No, in Need of Maintenance, Repair or Replacement?	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative	Control Measure is Operating Effectively?	If No, in Need of Maintenance, Repail or Replacement?	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools	Control Measure is Operating Effectively? ②Yes ③No	If No, in Need of Maintenance, Repair or Replacement?	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative	Control Measure is Operating Effectively? ②Yes ③No	If No; In Need of Maintenance, Repail; or Replacement? Maintenance Replacement Maintenance Replacement Maintenance	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater	Control Measure is Operating Effectively? ②Yes ③No	If No; In Need of Maintenance, Repail; or Replacement? Maintenance Replacement Maintenance Maintenance Replacement Maintenance Repair	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative	Control Measure is Operating Effectively? ②Yes ③No	If No; In Need of Maintenance, Repail; or Replacement? Maintenance Replacement Maintenance Replacement Maintenance	Corrective Action N	Needed and Notes (identify
Structural Gentrol Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater Conveyance -Swales Regenerative	Control Measure is Operating Effectively? © Yes © No	If No; In Need of Maintenance, Repail; or Replacement? Maintenance Replacement Maintenance Replacement Maintenance Repair Replacement	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater Conveyance -Swales Regenerative Stormwater	Control Measure is Operating Effectively? Pyes No	If No; In Need of Maintenance, Repair; or Replacement Maintenance Maintenance Replacement Maintenance Replacement Maintenance Replacement Maintenance Replacement	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater Conveyance -Swales Regenerative Stormwater Conveyance	Control Measure is Operating Effectively? © Yes © No	If No; In Need of Maintenance, Repair or Repair ® Repair ® Replacement Maintenance ® Maintenance ® Repair ® Repair ® Repair ® Repair ® Replacement	Corrective Action N	Needed and Notes (identify
Structural Gontrol Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater Conveyance -Swales Regenerative Stormwater Conveyance Stormwater	Control Measure is Operating Effectively? © Yes © No	If No; In Need of Maintenance, Repair; or Replacement Maintenance Maintenance Replacement Maintenance Replacement Maintenance Replacement Maintenance Replacement	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater Conveyance -Swales Regenerative Stormwater Conveyance	Control Measure is Operating Effectively? © Yes © No	If No; In Need of Maintenance, Repair; or Replacement Maintenance Repair A Replacement Maintenance Replacement Maintenance Replacement Replacement Replacement Replacement	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater Conveyance -Swales Regenerative Stormwater Conveyance -Sediment Pools Infiltration Trenches -	Control Measure is Operating Effectively? ①Yes ②No ②Yes ③No	If No; In Need of Maintenance, Repair; or Replacement Maintenance Maintenance Replacement Maintenance Replacement Maintenance Replacement Maintenance Replacement	Corrective Action N	Needed and Notes (identify
Structural Control Measure Regenerative Stormwater Conveyance Sediment Pools Regenerative Stormwater Conveyance -Swales Regenerative Stormwater Conveyance -Sediment Pools Infiltration	Control Measure is Operating Effectively? Pyes No Pyes No	If No; In Need of Maintenance, Repail; or Replacement? Maintenance Maintenance Replacement Maintenance Replacement Maintenance Replacement Maintenance Replacement Maintenance Maintenance Maintenance Maintenance	Corrective Action N	Needed and Notes (identify

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Bulk Materials Storage Building	⊠Yes □No □ N/A	es 🗆 No	
2	Waste Oil and Antifreeze Storage	Ves □No □N/A	Wes UNo	
3	Maintenance and Repair Shop	MYes QNo Q N/A	N es QNo	·
4	Vehicle and Equipment Storage	es ONO ON/A	Des DNo	
5	Waste handling and disposal areas	Ves □No □ N/A	Wes □No	
6	Spoils Area	VYes □No □ N/A	es 🗆 No	
7	Vehicle Tracking	Mes □No □ N/A	Yes QNo	
8	Non-stormwater/ Illicit Connections	Vayes QNo Q N/A	Vayes QNo	·
9	Other: TRUCK WASH ARGA	es 🗆 No 🗔 N/A	√Yes □No	

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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: CHIMA P. ONUKWUGHASR
Signature: Date: 9/22/2020

12/14/2020

NPDES Permit Tracking No.:



United States Environmental Protection Agency Washington, DC 20460

Annual Reporting Form
A. GENERAL INFORMATION
1. Facility Name: Anna Arandell Utuluus Cantet
2. NPDES Permit Tracking No.: 125 W23 45
3. Facility Physical Address:
a. Street: 4358 MAXWELL FRY6 ROAD
b. City: MILLERSVILLE MARY LANT c. State: MD d. Zip Code: 21108-
4. Lead Inspectors Name: CHI MA P. ONUKWUCHA Title: WILLIIIES ENGINEGR II
Additional Inspectors Name(s):
5. Contact Person: CHIMA PONURWUGHA TITLES GAGINEEN II
Phone: 410 - 222 - 8433 Ext. 8433 E-mail:
6. Inspection Date: 12/14/2010
B. GENERAL INSPECTION FINDINGS
1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to stormwater?
If NO, describe why not:
NOTE: Complete Section C of this form for each industrial activity area inspected and included in your SWPPP or as newly identified in B.2 or B.3 below where pollutants may be exposed to stormwater.
2. Did this inspection identify any stormwater or non-stormwater outfalls not previously identified in your SWPPP? YES
If YES, for each location, describe the sources of those stormwater and non-stormwater discharges and any associated control measures in place:

3. Did this inspection identify any sources of stormwater or non-stormwater discharges not previously identified in your SWPPP?
If YES, describe these sources of stormwater or non-stormwater pollutants expected to be present in these discharges, and any control measures in place:
34
4. Did you review stormwater monitoring data as part of this inspection to identify potential pollutant hot spots?
If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review: HO NEW WYER
Storetere/date was noticed derind the enspel
cteori.
5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring: The Success of potesticular are usher and high surface waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring: The Success of potesticular are usher and high surface waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring: The Success of potesticular areas waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring: The Success of potesticular areas waters, and the condition of and around outfalls, including flow dissipation measures to prevent scouring:
at the limitets and later socked up and disposed
to the expropriate location.
6. Have you taken or do you plan to take any corrective actions, as specified in Part 3 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? PYES NO NO CONCULU NEGULY VIG COUL MEGICANISM.
If YES, how many conditions requiring review for correction action as specified in Parts 3.1 and 3.2 were addressed by these corrective actions?
NOTE: Complete the attached Corrective Action Form (Section D) for each condition identified, including any conditions identified as a result of this comprehensive stormwater inspection.

C. INDUSTRIAL ACTIVITY AREA SPECIFIC FINDINGS				
Complete one block for each industrial activity area where pollutants may be exposed to stormwater. Copy this page for additional industrial activity areas.				
In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with stormwater; Leaks or spills from industrial equipment, drums, tanks, and other containers; Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and Tracking or blowing of raw, final, or waste materials from areas of no exposure to exposed areas.				
INDUSTRIAL ACTIVITY AREA Material Store	ig, eg. cold replied, seemel etc			
1. Brief Description: There were leak, to	to screp the area on a			
reguleer bases, no lite	ering,			
2. Are any control measures in need of maintenance or repair?	☐ YES ☑ NO			
3. Have any control measures failed and require replacement?	□ YES 12/NO			
4. Are any additional/revised control measures necessary in this area?	□ YES ØNO			
If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	(Any necessary corrective actions should be described on the attached			
INDUSTRIAL ACTIVITY AREA TRUCK HEUSE 1. Brief Description: The house is nice hydraulic etcleaks	BA dean, no oil, antefree			
Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised c necessary in this area? If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	☐ YES ☐ NO ☐ YES ☑ NO ☐ YES ☑ NO (Any necessary corrective actions should be described on the attached			
INDUSTRIAL ACTIVITY AREA GENEORITON STORES Brief Description: This area well k	rage, ne leaks or letering			
2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised BMPs necessary in this area? If YES to any of these three questions, provide a description of the problem: Corrective Action Form)	☐ YES ☐ NO ☐ YES ☐ NO ☐ YES ☐ NO (Any necessary corrective actions should be described on the attached			
	I			

NOTE: Copy this page and attach additional pages as necessary
INDUSTRIAL ACTIVITY AREA_ Vehicle truck was itanace.
1. Brief Description: This areas is nice and clean, The the
requirements are met, eg all down that has oil et
it has secondary contourment with tight
leditions, motorials for oil etc containment
2. Are any control measures in need of maintenance or repair? TYES 12100 Ct.
If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form)
INDUSTRIAL ACTIVITY AREA Grinder Pump mountain one.
1. Brief Description: This is nice and well kept. the channel the Cover cornies the bad water/matricels is
the forma is a so the loss to solve a formation of
working comies The ball water matricels is
The state of the s
2. Are any control measures in need of maintenance or repair?
3. Have any control measures failed and require replacement?
4. Are any additional/revised BMPs necessary in this area?
If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached
Corrective Action Form)
INDUSTRIAL ACTIVITY AREA_: Truck Vehecle WEShing area,
1. Brief Description: This area is clean and mointained
regulately, no debnis, o'il the system is
working according to design.
2. Are any control measures in need of maintenance or repair?
3. Have any control measures failed and require replacement?
4. Are any additional/revised BMPs necessary in this area?
If YES to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached
Corrective Action Form)

D. CORRECTIVE ACTIONS
Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.
Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in this comprehensive stormwater inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.
1. Corrective Action #
2. Is this corrective action:
☐ An update on a corrective action from a previous annual report; or
☐ A new corrective action?
3. Identify the condition(s) triggering the need for this review:
☐ Unauthorized release or discharge
☐ Numeric effluent limitation exceedance
☐ Control measures inadequate to meet applicable water quality standards
☐ Control measures inadequate to meet non-numeric effluent limitations
☐ Control measures not properly operated or maintained
☐ Change in facility operations necessitated change in control measures
☐ Average benchmark value exceedance
☐ Other (describe):
4. Briefly describe the nature of the problem identified:
5. Date problem identified:
6. How problem was identified:
☐ Comprehensive site inspection
☐ Quarterly visual assessment
☐ Routine facility inspection
☐ Benchmark monitoring
☐ Notification by EPA or State or local authorities
☐ Other (describe):
7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modifications are needed, basis for that determination:
8. Did/will this corrective action require modification of your SWPPP?
10. Date correction action completed: / / / or expected to be completed: / / / / / / / / / / / / / / / / / / /
11. If corrective action not yet completed, provide the status of corrective action at the time of the comprehensive site inspection and describe any remaining steps (including timeframes associated with each step) necessary to complete corrective action:

E. ANNUAL REPORT CERTIFICATION
1. Compliance Certification
Do you certify that your annual inspection has met the requirements of Part 4.2 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? (I YES NO
If NO, summarize why you are not in compliance with the permit:
2. Annual Report Certification
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.
Authorized Representative Printed Name: Title: UT 141TLES ENGINEEL T
Signature: Date Signed: 12/14/26

	SWPPP		
Dept 407.7	water line	Repair	
First Name	Last Name	Signature	Date
Michael	Werner	and	8-23-21
JAMES	NAPORA	1B.1	8/23/21
MAH NAPORA	NAPOLA	MNAPOLA	8 23 21
Collin South	Smith	Chin	8/23/21
Padricia	williams	Dare	8/23/21
J. SEARS	SEARI	Jan Som	8/23/21
temin 1 de	John Dorsey		8-23-21
(0125	1A-RIC5		8/23/21
D. Brum David		Und In	8-23-21
Chad	Kinnedy		8.23.21
Timethy	Hile)	Dail	8-23-21
JOBURY	genn Bnd	(Aunto	8-23-27
Maryland Reyer	Good Reyor	great	8-23
San FATO	tutanton	900	5/23/21
Day (#)	1 her	7	8 05 21
Adam Malisza	7	Claring to the C	0 25- 21
Michael Trackson	Jackson	M If he	81-01-1
Telicia	Blake	7.68	8/23/21
((1))	2	- 00	0,00,01

	SWPPP		
Dept	4053 Sews		
First Name	Last Name	Signature	Date
Kirt	Shockey	Thing	8-26-21
Wairen	young /	Maring	8-26-2021
Chis	Richardson	Chrolin hm	8-26-21-
Donald	Jones	2-4-	8-26-21
Torone	Colbert	In Collet	8 26 21
Vinothy	Napara	J. Var	8-26-21
BrIAN	Weiman	B-W-	8-2621
William	Armshory	My his	8-26-21
Nicholes DOLDE	Bardroff	Am Bute	8126/21
Chris	Blake	Can' Rose	8/26/21
LOUIS ADOCTO	Acc	Que	- 62621
JERRY	SMOOT	(Angest	8,26 21
Danis	Paddy	Alles	8/26/21
Steel	tienice	1	8/26/21
Brian	K16/12	the Fr	8/26/21
1/2	CAMRA		8/46/20
			,

	SWPPP	Training	MIMA DALA
Dept First Name	4014 Water	line mainten	
	Last Name	Signature	Date
Mar	Micciche	71 Miccich	8-26-2021
Sommer	Fanton	Sures	8-26-21
Havi Harry	-Brown	Hay Rice	8 26-21
Rom Ron	Rogers	Rend K/Ey	8-26-21
Matthew	Lauthorn	90	8 26-21
Josh	Thampson	Map	8-26-2
CALLY GERALI	Tares /	liff	8/24/21
BRIAN	DAVEY	Bisan	8/26/21
Buchn	Thompson		2/2//2
	/ / /		15/0/5/18
Jamar	Kane	J. Kane	8/26/21
William	koun	Hills Re	8/26/21
Council de	Patrick	Moles	8/26/2/
Thomas	Rede	Rn	8.2621
Reggie	Thomas		·
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	SWPPP		1,
Dept	4054 Jewer	Tine maintena	
First Name	Last Name	Signature	Date
CASSINS	ONENS	Cosso ana	8-27-21
KATI	Notaberger -	Mar	8-27-11
Milfen	Edwards	Mich She	8/27/2021
Joseph	Hicks Jr.	Sant elfour hi	8/27/2021
Donald School	To Shreider	Dondalmes	8/27/2021
Walter	Belt	Walter Belt	8/27/2621
Kevin	Karnieski		8/27/21
Thomas	Selman III	Show D Jdl Att	8-27-21
Rudolph	Woods	Kudal / L/a	P27-17
Veric Bru	Brow)	Jaro to	8-2-
Raymond Crox	Crooks	#Ol	827-2011
V Jamaine	Young	Jann Yong	8/27/21
Michael	Tasker	Metal Jash	8/27/21
ISSAC	Colbert	Dasoc Cally	8-27-21
JAMES	SMITHTE	Jours E. Irauf -	8-27-2021
Anthony	Horgrane	Outbox & Hongy	8-27-21
/	5		
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	SWPPP	Training	700199 850
First Name	Last Name	Signature	Date
ALVIN DIXON	DIXON		9-13-21
1614 Kosmer	KEEMEL	Jan .	9-13-21
BERNARIS	CAMPBELL	B& Schell	9-13.2021
DARHEL	Emerson	Det	9-13-2021
James	Steinhice	Jan	9-13-21
Maurice	Hebron	on-	9/13/21
Lionel	Green	Jun Minee	7/13/21
BRIAN	CARTER	Brian Carta	9-13-21
BRIAN	5m, 49	3-011	9-13-21
Thomas Hall	Halle	Sta .	7-11-2
Lyrisha Herm	Hearn	Line	9-13-31
Ells Hens	Heusen	All for	9/13/2
Adam Arastat	Marshall	Edein Medall	9/13/21
Bran	Dorton	D	9/13/21
Mat &	Cectierret	2	9-13
LALANG Quell	Paren 1'		9:13
Vincent Magnod	Majnara	very	9-13-21
Suff	Wala	1	9-17-21
Albert Hawford	AMM		
Albert	Hayrara	10A	9-113-21
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