# SRF CWA Metrics, Round 4



| ID # | Name | Type | Goal | What it measures |
|---|---|---|---|---|
| | | | | **ELEMENT 1 - DATA** |
| 1b5 | Completeness of data entry on major and non-major permit limits. | Data, Goal | ≥95% | Completeness of information entered into the ICIS-NPDES database for permit limits. |
| 1b6 | Completeness of data entry on major and non-major discharge monitoring reports. | Data, Goal | ≥95% | Completeness of information entered into the ICIS-NPDES database for discharge monitoring reports. |
| 2b | Files reviewed where data are accurately reflected in the national data system | File, Goal | 100% | Percentage of files reviewed where mandatory data are accurately reflected in the national data system. The numerator = number of files that accurately reflect mandatory data, denominator = number of files reviewed. |
| | | | | **ELEMENT 2 - INSPECTIONS** |
| 4a1 | Number of pretreatment compliance inspections and audits at approved local pretreatment programs | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is two pretreatment compliance inspections that include ≥ 2 oversight inspections of industrial users (IUs) and one audit at each approved local pretreatment program within five years. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for pretreatment facilities. |
| 4a2 | EPA or state Significant Industrial User inspections for SIUs discharging to non-authorized POTWs | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one sampling inspection at each SIU annually. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for SIU facilities. |
| 4a4 | Number of CSO inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one inspection of each major and non-major CSO every five years for states with combined sewer systems. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for CSO facilities. |
| 4a5 | Number of SSO inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is to inspect 5% of the universe of permitted POTWs with SSS annually. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for SSO facilities. |

| | | | | |
|---|---|---|---|---|
| 4a7 | Number of Phase I and II MS4 audits or inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one audit, on-site inspection, or off-site desk audit* of each Phase I MS4 every five years and one inspection or on-site audit of each Phase II MS4 every seven years. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for Phase I and II MS4 facilities. ** Off-site desk audits include but are not limited to review of facility reports and records, review of agency-gathered testing, sampling and ambient monitoring data, evaluation of responses to CWA section 308 information requests, review of compliance deliverables submitted pursuant to permits or enforcement actions, and analysis of aerial or satellite images. An off-site desk audit conducted pursuant to a CMS plan will include the appropriate combination of these activities to allow the region or the state to make a facility-level or program level compliance determination. In order for an off-site desk audit or focused inspection to count toward CMS implementation for the results in this table, the region or state must report the activity into ICIS-NPDES (either through direct data entry or via the CDX National Environmental Information Exchange Network). See Part 3 of the CWA NPDES CMS for additional details on focused inspections and off-site desk audits. |
| 4a8 | Number of industrial stormwater inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is 10% of the state universe each year. (includes inspections of unpermitted facilities and those with and without "no exposure certification.)" Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for industrial stormwater facilities. |
| 4a9 | Number of Phase I and Phase II construction stormwater inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is 10% of the state Phase I and II universe each year (including inspections of unpermitted sites). Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for Phase I and II construction stormwater facilities. |
| 4a10 | Number of comprehensive inspections of large and medium NPDES permitted concentrated animal feeding operations (CAFOs). | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one comprehensive inspection of each large and medium NPDES-permitted CAFO every five years. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for large and medium CAFO facilities. |

| | | | | |
|---|---|---|---|---|
| 4a11 | Number of sludge/biosolids inspections at each major POTW. | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one inspection every 5 years for each major POTW in a state with biosolids program authorization. Biosolids use and disposal operations, including incineration and surface application, should receive at least one sludge/biosolids inspection every 5 years.*States may substitute an off-site desk audit for sludge/biosolids generation, use, and disposal sites that meet the following criteria: (1) are not currently subject to enforcement actions or compliance schedules that are the result of concluded enforcement actions; (2) have not been reported in Significant Noncompliance (SNC) within the previous four quarters; (3) have no unresolved single event violation(s) identified in prior inspection(s); (4) do not discharge to CWA section 303(d) listed waters for pollutant(s) contributing to the listing; and (5) have no known potential to impact drinking water supplies. A CMS plan that utilizes this approach for conducting off-site desk audits in lieu of sludge/biosolids inspections is still considered a traditional CMS plan. In states where EPA is the permitting authority for biosolids, compliance monitoring activities for biosolids facilities will be conducted in accordance with plans and protocols established by the EPA Biosolids Center for Excellence. |
| 5a1 | Inspection coverage of NPDES majors | Data, Goal | 100% of state CMS plan commitment | Percentage of major NPDES facilities inspected. The numerator = the number of major NPDES facilities inspected; the denominator = the number of major NPDES facilities scheduled for inspection in the state specific CMS Plan for the review year. Reviewers are to compare the number of state inspections of major NPDES facilities listed in the data metric analysis to the commitment in the state specific CMS Plan for the review year; the denominator that automatically populates in the data metric analysis for Metric 5a1 is not likely to reflect the state's annual inspection commitment that varies from year to year. The denominator for this metric is the state's inspection commitment listed in the state specific CMS plan for the review year. It is also helpful to examine state end of year reports on inspection results to assess inspection coverage and to determine whether all inspections are reported in the ICIS database. |
| 5b1 | Inspections coverage of NPDES non-majors with individual permits | Data, Goal | 100% of state CMS plan commitment | The percentage of NPDES individual non-major permittees inspected in review year. The numerator = the number of non-major individual permittees inspected; the denominator = the number of non-major individual permittees scheduled for inspection in the state specific CMS Plan for the review year. Reviewers are to compare the number of state inspections of non-major NPDES facilities listed in the data metric analysis to the commitment in the state specific CMS Plan for the review year; the denominator that automatically populates in the data metric analysis for Metric 5b1 is not likely to reflect the state's annual inspection commitment that varies from year to year. The denominator for this metric is the state's inspection commitment listed in the state specific CMS plan for the review year. It is also helpful to examine state end of year reports on inspection results to assess inspection coverage and to determine whether all inspections are reported in the ICIS database. |

| | | | | |
|---|---|---|---|---|
| 5b2 | Inspections coverage of NPDES non-majors with general permits | Data, Goal | 100% of state CMS plan commitment | Percentage of non-major NPDES facilities with general permits inspected. The numerator = the number of non-major facilities with general permits inspected; the denominator = the number of facilities with non-major general permits committed to for inspection in the state specific CMS Plan for the review year. Reviewers are to compare the number of state inspections of non-major NPDES facilities listed in the data metric analysis to the commitment in the state specific CMS Plan for the review year; the denominator that automatically populates in the data metric analysis for Metric 5b2 is not likely to reflect the state's annual inspection commitment that varies from year to year. The denominator for this metric is the state's inspection commitment listed in the state specific CMS plan for the review year. It is also helpful to examine state end of year reports on inspection results to assess inspection coverage and to determine whether all inspections are reported in the ICIS database. |
| 6a | Inspection reports complete and sufficient to determine compliance at the facility | File, Goal | 100% | Percentage of inspection reports reviewed that provide sufficient documentation to determine compliance. This metric describes the quality of inspection reports. Numerator = number of inspection reports with sufficient documentation to determine compliance; denominator = total number of inspection reports reviewed. |
| 6b | Timeliness of inspection report completion | File, Goal | 100% | Percentage of inspection reports reviewed that are timely. The numerator = number of inspection reports completed within recommended timeframe; denominator = total number of inspection reports reviewed. |

| | | | | |
|---|---|---|---|---|
| **ELEMENT 3 - VIOLATIONS** | | | | |
| 7j1 | Number of major and non-major facilities with single-event violations reported in the review year | Review Indicator | N/A | Assesses whether single-event violations (SEVs) determined by means other than automated discharge-to-limits comparisons are reported and tracked in ICIS-NPDES. This metric is limited to SEVs that start within the federal fiscal year reviewed under SRF; SEVs that begin in prior years and continue in the review year are not reported under this metric. |
| 7k1 | Major and non-major facilities in noncompliance | Review Indicator | N/A | The percentage of major and non-major facilities with violations reported to the national database. Violations factored into metric 7k1 include effluent, single event, compliance schedule, and permit schedule violations for QNCR codes D, E, N, S, T, X, and V . |
| 7e | Accuracy of compliance determinations | File, Goal | 100% | Percentage of files reviewed with sufficient documentation leading to an accurate compliance determination. The numerator = number of files containing inspection reports reviewed with sufficient documentation leading to an accurate compliance determination; denominator = total number of inspection reports reviewed. |
| 8a3 | Percentage of major facilities in SNC and non-major facilities Category I noncompliance during the reporting year | Review Indicator | N/A | Percentage of major NPDES facilities in significant non-compliance and non-major facilities in Category I noncompliance during the review year. The numerator = the number of majors in SNC and non-majors in Category I noncompliance during review year; denominator = total number of majors and non-majors |
| **ELEMENT 4 - ENFORCEMENT** | | | | |
| 9a | Percentage of enforcement responses that returned, or will return, a source in violation to compliance | File, Goal | 100% | Percentage of enforcement responses in reviewed files that returned, or will return, a source in violation to compliance. Reviewers should evaluate all enforcement responses found in selected files regardless of the type of violation. The violations addressed by reviewed enforcement responses may be SNC or non-SNC violations. The numerator = number of enforcement responses that returned or will return the source to compliance; denominator = total number of enforcement responses in reviewed files. |
| 10a1 | Percentage of major NPDES facilities with formal enforcement action taken in a timely manner in response to SNC violations | Review Indicator | | The percentage of major NPDES facilities in SNC during the review year with formal enforcement action taken in a timely manner during the review year and quarter 1 of the subsequent fiscal year that address SNC violations at major facilities. Numerator=the number of major NPDES facilities in the denominator having formal enforcement action in the review year or quarter 1 of the following fiscal year. Denominator=the number of major facilities with two or more consecutive quarters of SNC non-effluent violations or SNC effluent violations at: the same pipe and parameter reported in the Quarterly Noncompliance Report (QNCR), or facilities with significant effluent violations in 2 consecutive quarters for violations of the same pipe and parameter in each quarter, or facilities with compliance schedule violations in 2 consecutive quarters with open compliance schedule violations at any time in the fiscal year. |
| 10b | Enforcement responses reviewed that address violations in an appropriate manner | File, Goal | 100% | The percentage of enforcement actions taken in an appropriate manner. The numerator = the number of appropriate enforcement responses in reviewed in files taken to address violations; denominator = the number of actions identified by the reviewer. |
| **ELEMENT 5 - PENALTIES** | | | | |

| | | | | |
|---|---|---|---|---|
| 11a | Penalty calculations reviewed that document and include gravity and economic benefit | File, Goal | 100% | Percentage of penalty calculations reviewed that document and include, where appropriate, gravity and economic benefit. The numerator = the number of penalties reviewed where the penalty was appropriately calculated and documented; the denominator = the number of penalties reviewed. |
| 12a | Documentation of rationale for difference between initial penalty calculation and final penalty | File, Goal | 100% | Percentage of penalties reviewed that document the rationale for the final value assessed when it is lower than the initial calculated value. The numerator = number of penalties reviewed that document the rationale for the final value assessed compared to the initial value calculated; denominator = number of penalties reviewed where final value assessed is lower than initial value calculated. |
| 12b | Penalties collected | File, Goal | 100% | Percentage of penalty files reviewed that document collection of penalty. The numerator = the number of penalties with documentation of collection, or measure, or documentation of measures to collect a delinquent penalty; the denominator = the number of penalties reviewed. |

# SRF CWA Data Metrics, Round 4

| ID # | Name | Type | Goal | What it measures |
|---|---|---|---|---|
| | | | ELEMENT 1 - DATA | |
| 1b5 | Completeness of data entry on major and non-major permit limits. | Data, Goal | ≥95% | Completeness of information entered into the ICIS-NPDES database for permit limits. |
| 1b6 | Completeness of data entry on major and non-major discharge monitoring reports. | Data, Goal | ≥95% | Completeness of information entered into the ICIS-NPDES database for discharge monitoring reports. |
| | | | ELEMENT 2 - INSPECTIONS | |
| 5a1 | Inspection coverage of NPDES majors | Data, Goal | 100% of state CMS plan commitment | Percentage of major NPDES facilities inspected. The numerator = the number of major NPDES facilities inspected; the denominator = the number of major NPDES facilities scheduled for inspection in the state specific CMS Plan for the review year. Reviewers are to compare the number of state inspections of major NPDES facilities listed in the data metric analysis to the commitment in the state specific CMS Plan for the review year; the denominator that automatically populates in the data metric analysis for Metric 5a1 is not likely to reflect the state's annual inspection commitment that varies from year to year. The denominator for this metric is the state's inspection commitment listed in the state specific CMS plan for the review year. It is also helpful to examine state end of year reports on inspection results to assess inspection coverage and to determine whether all inspections are reported in the ICIS database. |
| 5b1 | Inspections coverage of NPDES non-majors with individual permits | Data, Goal | 100% of state CMS plan commitment | The percentage of NPDES individual non-major permittees inspected in review year. The numerator = the number of non-major individual permittees inspected; the denominator = the number of non-major individual permittees scheduled for inspection in the state specific CMS Plan for the review year. Reviewers are to compare the number of state inspections of non-major NPDES facilities listed in the data metric analysis to the commitment in the state specific CMS Plan for the review year; the denominator that automatically populates in the data metric analysis for Metric 5b1 is not likely to reflect the state's annual inspection commitment that varies from year to year. The denominator for this metric is the state's inspection commitment listed in the state specific CMS plan for the review year. It is also helpful to examine state end of year reports on inspection results to assess inspection coverage and to determine whether all inspections are reported in the ICIS database. |

| | | | | |
|---|---|---|---|---|
| 5b2 | Inspections coverage of NPDES non-majors with general permits | Data, Goal | 100% of state CMS plan commitment | Percentage of non-major NPDES facilities with general permits inspected. The numerator = the number of non-major facilities with general permits inspected; the denominator = the number of facilities with non-major general permits committed to for inspection in the state specific CMS Plan for the review year. Reviewers are to compare the number of state inspections of non-major NPDES facilities listed in the data metric analysis to the commitment in the state specific CMS Plan for the review year; the denominator that automatically populates in the data metric analysis for Metric 5b2 is not likely to reflect the state's annual inspection commitment that varies from year to year. The denominator for this metric is the state's inspection commitment listed in the state specific CMS plan for the review year. It is also helpful to examine state end of year reports on inspection results to assess inspection coverage and to determine whether all inspections are reported in the ICIS database. |
| **ELEMENT 3 - VIOLATIONS** | | | | |
| 7j1 | Number of major and non-major facilities with single-event violations reported in the review year | Review Indicator | N/A | Assesses whether single-event violations (SEVs) determined by means other than automated discharge-to-limits comparisons are reported and tracked in ICIS-NPDES. This metric is limited to SEVs that start within the federal fiscal year reviewed under SRF; SEVs that begin in prior years and continue in the review year are not reported under this metric. |
| 7k1 | Major and non-major facilities in noncompliance | Review Indicator | N/A | The percentage of major and non-major facilities with violations reported to the national database. Violations factored into metric 7k1 include effluent, single event, compliance schedule, and permit schedule violations for QNCR codes D, E, N, S, T, X, and V . |
| 8a3 | Percentage of major facilities in SNC and non-major facilities in Category I noncompliance during the reporting year | Review Indicator | N/A | Percentage of major NPDES facilities in significant non-compliance and non-major facilities in Category I noncompliance during the review year. The numerator = the number of majors in SNC and non-majors in Category I noncompliance during review year; denominator = total number of majors and non-majors. |
| **ELEMENT 4 - ENFORCEMENT** | | | | |

| | | | |
|---|---|---|---|
| 10a1 | Percentage of major NPDES facilities with formal enforcement action taken in a timely manner in response to SNC violations | Review Indicator | The percentage of major NPDES facilities in SNC during the review year with formal enforcement action taken in a timely manner during the review year and quarter 1 of the subsequent fiscal year that address SNC violations at major facilities. Numerator=the number of major NPDES facilities in the denominator having formal enforcement action in the review year or quarter 1 of the following fiscal year. Denominator=the number of major facilities with two or more consecutive quarters of SNC non-effluent violations or SNC effluent violations at: the same pipe and parameter reported in the Quarterly Noncompliance Report (QNCR), or facilities with significant effluent violations in 2 consecutive quarters for violations of the same pipe and parameter in each quarter, or facilities with compliance schedule violations in 2 consecutive quarters with open compliance schedule violations at any time in the fiscal year. |

# SRF CWA File Metrics, Round 4

| ID # | Name | Type | Goal | What it measures |
|---|---|---|---|---|
| | | | | **ELEMENT 1 - DATA** |
| 2b | Files reviewed where data are accurately reflected in the national data system | File, Goal | 100% | Percentage of files reviewed where mandatory data are accurately reflected in the national data system. The numerator = number of files that accurately reflect mandatory data, denominator = number of files reviewed. |
| | | | | **ELEMENT 2 - INSPECTIONS** |
| 6a | Inspection reports complete and sufficient to determine compliance at the facility | File, Goal | 100% | Percentage of inspection reports reviewed that provide sufficient documentation to determine compliance. This metric describes the quality of inspection reports. Numerator = number of inspection reports with sufficient documentation to determine compliance; denominator = total number of inspection reports reviewed. |
| 6b | Timeliness of inspection report completion | File, Goal | 100% | Percentage of inspection reports reviewed that are timely. The numerator = number of inspection reports completed within recommended timeframe; denominator = total number of inspection reports reviewed. |
| | | | | **ELEMENT 3 - VIOLATIONS** |
| 7e | Accuracy of compliance determinations | File, Goal | 100% | Percentage of files reviewed with sufficient documentation leading to an accurate compliance determination. The numerator = number of files containing inspection reports reviewed with sufficient documentation leading to an accurate compliance determination; denominator = total number of inspection reports reviewed. |

| | | | | |
|---|---|---|---|---|
| | **ELEMENT 4 - ENFORCEMENT** | | | |
| 9a | Percentage of enforcement responses that returned, or will return, a source in violation to compliance | File, Goal | 100% | Percentage of enforcement responses in reviewed files that returned, or will return, a source in violation to compliance. Reviewers should evaluate all enforcement responses found in selected files regardless of the type of violation. The violations addressed by reviewed enforcement responses may be SNC or non-SNC violations. The numerator = number of enforcement responses that returned or will return the source to compliance; denominator = total number of enforcement responses in reviewed files. |
| 10b | Enforcement responses reviewed that address violations in an appropriate manner | File, Goal | 100% | The percentage of enforcement actions taken in an appropriate manner. The numerator = the number of appropriate enforcement responses in reviewed files taken to address violations; denominator = the number of actions identified by the reviewer. |
| | **ELEMENT 5 - PENALTIES** | | | |
| 11a | Penalty calculations reviewed that document and include gravity and economic benefit | File, Goal | 100% | Percentage of penalty calculations reviewed that document and include, where appropriate, gravity and economic benefit. The numerator = the number of penalties reviewed that document the rationale for the final value assessed compared to the initial value calculated; the denominator = the number of penalties reviewed where final value assessed is lower than initial value calculated. |
| 12a | Documentation of rationale for difference between initial penalty calculation and final penalty | File, Goal | 100% | Percentage of penalties reviewed that document the rationale for the final value assessed when it is lower than the initial calculated value. The numerator = number of penalties reviewed that document the rationale for the final value assessed compared to the initial value calculated; denominator = number of penalties reviewed where final value assessed is lower than initial value calculated. |
| 12b | Penalties collected | File, Goal | 100% | Percentage of penalty files reviewed that document collection of penalty. The numerator = the number of penalties with documentation of collection, or measure, or documentation of measures to collect a delinquent penalty; the denominator = the number of penalties reviewed. |

| ID # | Name | Type | Goal | What it measures |
|---|---|---|---|---|
| | | | | **ELEMENT 2 - INSPECTIONS** |
| 4a1 | Number of pretreatment compliance inspections and audits at approved local pretreatment programs | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is two pretreatment compliance inspections that include ≥ 2 oversight inspections of industrial users (IUs) and one audit at each approved local pretreatment program within five years. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for pretreatment facilities. |
| 4a2 | EPA or state Significant Industrial User inspections for SIUs discharging to non-authorized POTWs | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one sampling inspection at each SIU annually. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for SIU facilities. |
| 4a4 | Number of CSO inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one inspection of each major and non-major CSO every five years for states with combined sewer systems. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for CSO facilities. |
| 4a5 | Number of SSO inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is to inspect 5% of the universe of permitted POTWs with SSS annually. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for SSO facilities. |
| 4a7 | Number of Phase I and II MS4 audits or inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one audit, on-site inspection, or off-site desk audit* of each Phase I MS4 every five years and one inspection or on-site audit of each Phase II MS4 every seven years. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan for the review year, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for Phase I and II MS4 facilities. ** Off-site desk audits include but are not limited to review of facility reports and records, review of agency-gathered testing, sampling and ambient monitoring data, evaluation of responses to CWA section 308 information requests, review of compliance deliverables submitted pursuant to permits or enforcement actions, and analysis of aerial or satellite images. An off-site desk audit conducted pursuant to a CMS plan will include the appropriate combination of these activities to allow the region or the state to make a facility-level or program level compliance determination. In order for an off-site desk audit or focused inspection to count toward CMS implementation for the results in this table, the region or state must report the activity into ICIS-NPDES (either through direct data entry or via the CDX National Environmental Information Exchange Network). See Part 3 of the CWA NPDES CMS for additional details on focused inspections and off-site desk audits. |

| | | | | |
|---|---|---|---|---|
| 4a8 | Number of industrial stormwater inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is 10% of the state universe each year. (includes inspections of unpermitted facilities and those with and without "no exposure certification.)" Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for industrial stormwater facilities. |
| 4a9 | Number of Phase I and Phase II construction stormwater inspections | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is 10% of the state Phase I and II universe each year (including inspections of unpermitted sites). Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for Phase I and II construction stormwater facilities. |
| 4a10 | Number of inspections of large and medium concentrated animal feeding operations (CAFOs) | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one comprehensive inspection of each large and medium NPDES-permitted CAFO every five years. Reviewers should compare the number of state inspections to the commitment in the state specific CMS Plan, or against the goal in the NPDES CMS policy if there is no state specific CMS plan for large and medium CAFO facilities. |
| 4a11 | Number of sludge/biosolids inspections at each major POTW. | CMS | 100% of state CMS plan commitment | Target: EPA's CMS goal is one inspection every 5 years for each major POTW in a state with biosolids program authorization. Biosolids use and disposal operations, including incineration and surface application, should receive at least one sludge/biosolids inspection every 5 years.*States may substitute an off-site desk audit for sludge/biosolids generation, use, and disposal sites that meet the following criteria: (1) are not currently subject to enforcement actions or compliance schedules that are the result of concluded enforcement actions; (2) have not been reported in Significant Noncompliance (SNC) within the previous four quarters; (3) have no unresolved single event violation(s) identified in prior inspection(s); (4) do not discharge to CWA section 303(d) listed waters for pollutant(s) contributing to the listing; and (5) have no known potential to impact drinking water supplies. A CMS plan that utilizes this approach for conducting off-site desk audits in lieu of sludge/biosolids inspections is still considered a traditional CMS plan. In states where EPA is the permitting authority for biosolids, compliance monitoring activities for biosolids facilities will be conducted in accordance with plans and protocols established by the EPA Biosolids Center for Excellence. |

DO NOT EDIT
For Esri use only

7