General Information
(See reverse for instructions)

Name of Project	HIGHWAY PR-9 FROM PR-132 TO PR-123	**CGP Tracking No.**		**Inspection Date**	12-Abril-13
Inspector Name, Title & Contact Information					
Present Phase of Construction	PHASE I, AND II				
Inspection Location (if multiple inspections are required, specify location where this inspection is being conducted)	ENTERE SITE				

Inspection Frequency *(Note: you may be subject to different inspection frequencies in different areas of the site. Check all that apply.)*

Standard Frequency: ☐ Weekly ☒ Every 14 days and within 24 hours of a 0.25" rain

Increased Frequency: ☐ Every 7 days and within 24 hours of a 0.25" rain (for areas of sites discharging to sediment or nutrient-impaired waters or to waters designated as Tier 2, Tier 2.5, or Tier 3)

Reduced Frequency:
- ☐ Once per month (for stabilized areas)
- ☐ Once per month and within 24 hours of a 0.25" rain (for arid, semi-arid, or drought-stricken areas during seasonally dry periods or during drought)
- ☐ Once per month (for frozen conditions where earth-disturbing activities are being conducted)

Was this inspection triggered by a 0.25" storm event? ☐ Yes ☒ No

If yes, how did you determined whether a 0.25" storm event has occurred?

☐ Rain gauge on site ☐ Weather station representative of site. Specify weather station source:

Total rainfall amount that triggered the inspection (in inches): ____

Unsafe Conditions for Inspection

Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? ☐ Yes ☐ No

If "yes", complete the following:

- Describe the conditions that prevented you from conducting the inspection in this location:

- Location(s) where conditions were found:

Condition and Effectiveness of Erosion and Sediment (E&S) Controls (CGP Part 2.1) (See Reverse for Instructions)				
Type/Location of E&S Control [Add an additional sheet if necessary]	**Repairs or Other Maintenance Needed?***	**Corrective Action Required?***	**Date on Which Maintenance or Corrective Action First Identified?**	**Notes**
1. PR-132	☐Yes ☒No	☐Yes ☒No		
2. E-24+54 a 27+00(1)	☐Yes ☐No ☐Yes ☒No	☐Yes ☐No ☐Yes ☒No	03-DIC-12	
3. 27+00 a 28+20(1)	☐Yes ☒No	☐Yes ☒No	03-DIC-12	
4. E-5+51 a 1+40(AR1)	☐Yes ☐No ☐Yes ☒No	☐Yes ☐No ☐Yes ☒No	03-DIC-12	
5. E-1+40 a 4+40(AR1)	☐Yes ☒No	☐Yes ☒No	03-DIC-12	
6. E-3+80(AR1) a 78+66(9)	☐Yes ☐No ☐Yes ☒No	☐Yes ☐No ☐Yes ☒No		
7. ZONA CANAL HISTORICO	☐Yes ☒No	☐Yes ☒No	COLOCACIÓN DE SILT FENCE	
8.				
9.				

Stabilization of Exposed Soil (CGP Part 2.2) (See reverse for instructions)			
Stabilization Area [Add an additional sheet if necessary]	**Stabilization Method**	**Have You Initiated Stabilization?**	**Notes**
1.		☐ YES ☐ NO If yes, provide date:	
2.		☐ YES ☐ NO If yes, provide date:	
3.		☐ YES ☐ NO If yes, provide date:	
4.		☐ YES ☐ NO If yes, provide date:	
5.		☐ YES ☐ NO If yes, provide date:	

Description of Discharge (CGP Part 4.1 & 4) (See reverse for instructions)	
Was a stormwater discharge or other discharge occurring from any part of your site at the time of the inspection? ☐ Yes ☐ No **If "yes", provide the following information for each point of discharge:**	
Discharge Location [Add an additional sheet if necessary]	**Observations**
1.	Describe the discharge: At points of discharge and the channels and banks of surface waters in the immediate vicinity, are there any visible signs of erosion and/or sediment accumulation that can be attributed to your discharge? ☐ Yes ☐ No If yes, describe what you see, specify the location(s) where these conditions were found, and indicate whether modification, maintenance, or corrective action is needed to resolve the issue:
2.	Describe the discharge: At points of discharge and the channels and banks of surface waters in the immediate vicinity, are there any visible signs of erosion and/or sediment accumulation that can be attributed to your discharge? ☐ Yes ☐ No If yes, describe what you see, specify the location(s) where these conditions were found, and indicate whether modification, maintenance, or corrective action is needed to resolve the issue:

Contractor or Subcontractor Certification and Signature
(see reverse for instructions)

"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."

Signature of Contractor or Subcontractor: _____ **Date:** 12-Abril-13

Printed Name and Affiliation: CESAR SOTO

Certification and Signature by Permittee
(see reverse for instructions)

"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."

Signature of Permittee or "Duly Authorized Representative": _____ **Date:**

Printed Name and Affiliation: _____