

**Water Management Plan
Parks and Recreation Department Main Building
City of Appleton, Wisconsin**

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Report

QUARTERLY VISUAL STORMWATER INSPECTION

Instructions: Quarterly inspections should be conducted to document that the provisions of the SWMP are being followed, and to identify areas needing improvement. The completed forms should be placed in Appendix C, and kept for at least 5 years.

Date: 8/23/16

Time: 11:10 AM

Weather Conditions: Rain/Overcast

AREAS	BASIN 1 (PORTION OF BUILDING, FORESTRY STORAGE, SOUTHERN OUTSIDE STORAGE, REFUSE AND RECYCLING CONTAINERS, AND ASPHALT DRIVES)	BASIN 2 (PORTION OF BUILDING, SOUTHERN OUTSIDE STORAGE, ASTS AND DISPENSERS, AND ASPHALT DRIVES)
Any signs of oil sheens, foam, sludge, or rust precipitation?	NONE	NONE
Any signs of other contaminants at the storage locations or along stormwater flow path?	GRASS CLIPPING, AT 134% OF LONGWAY DRIVE	NONE
Observe stormwater flow paths. Any yard waste storage in flow path?	NONE	NONE
Any litter or trash on ground/rooftop:	NONE	NONE
Other observations?		



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AREAS	BASIN 3 (EASTERN GRASS BERM)	BASIN 4 (PORTION OF BUILDING, LOADING DOCK, AND GRASS AREAS)
Any signs of oil sheens, foam, sludge, or rust precipitation?	NONE	NONE
Any signs of other contaminants at the storage locations or along storm water flow path?	NONE	NONE
Observe stormwater flow paths. Any yard waste storage in flow path?	NONE	NONE
Any litter or trash on ground:	NONE	NONE
Other observations?		

Inspected by:

[Handwritten Signature]
Amberl Smit

(Signature)

(Printed Name)



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Non-Stormwater Discharges

Facility Inspected:

Name: City of Appleton, Parks and Recreation Department Main Building
Location: 1819 Witzke Boulevard, Appleton, WI 54911

Evaluate all outfalls for non-stormwater discharges during normal business hours. Evaluations should take place during dry periods. Observations should be made **twice a year**.

OUTFALL 01 (BASIN 2)

Is there currently evidence of dry weather flow in the basin? Yes No

Are there stains or coloring? Yes No

Are there sludges? Yes No

Are there odors? Yes No

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland

Other _____

OUTFALL 02 (BASIN 4)

Is there currently water flow or evidence of dry weather flow? Yes No

Are there stains or coloring? Yes No

Are there sludges? Yes No

Are there odors? Yes No

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:

Test Method: Visual Observation - Overland

Other _____

BASIN 1

Is there currently evidence of dry weather flow in the basin? Yes No

Are there stains or coloring? Yes No

Are there sludges? Yes No

Are there odors? Yes No

Other observations: _____

If any questions were answered yes, briefly describe and state possible source:



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BASIN 3

Test Method: Visual Observation - Overland Other _____

Is there currently evidence of dry weather flow in the basin? Yes _____ No X

Are there stains or coloring? Yes _____ No X

Are there sludges? Yes _____ No X

Are there odors? Yes _____ No X

Other observations: _____

If any questions were answered yes, briefly describe and state possible source: _____

Test Method: Visual Observation - Overland Other _____

Inspected by:

[Handwritten Signature]

(Signature)

[Handwritten Name]

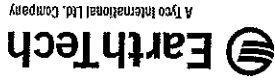
Name:

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Date:

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Time:



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