Stormwater Pollution Prevention - Stormwater Inspection Reports Calendar Year 2016 **Appleton Water Plant**

Quarterly Visual Inspection

	iving			
Comments	Aquatic vegetation present and thriving	for all events.		
4th Quarter	12/2/2016			
3rd Quarter	9/27/2016			
2nd Quarter	4/28/2016			
1st Quarter	3/8/2016			
Outfall Number				

Semi-Annual Dry Weather Inspection

Comments				
July - December	9/27/2016			
January - June	3/8/2016			
Outfall Number Jan				

Staff Training Date(s) SWPP/SPCC =

not all staff completed training

Annual Facility Site Compliance Report (AFSCI)

Completion Date = 12/28/2016

ANNUAL SITE INSPECTION CHECKLIST

A comprehensive site inspection has recently been completed. This annual inspection is performed to evaluate the effectiveness of controlling stormwater contamination and to identify any additional measures that can be feasibly implemented. The Stormwater Management Plan has been revised to reflect any changes.

CHECKLIST FOR ANNUAL INSPECTION:

- 1. Inspect site drainage conditions. Things to look for include the following:
 - Inspect the site for possible erosion problems.
 - Determine if drainage off the Property has changed. Are there any new areas of ponding or streaming?
- Are there any unusual stains around stormwater inlets? Check for any potential pollution sources. These sources may include the following: 2. Inspect the chemical fill ports and loading areas. Is there any indication of spills or leaks? Inspect the area near the refuse and recycling containers. • If there is any standing water at the time of inspection, are there sheens, sludge, foam, or rust precipitations? Inspect all areas of the Property for signs of spills or other contaminants. Perform the following preventive maintenance activities: 3. Inspect the dumpster and recycle bin covers for proper operation. Inspect the drain opening located in the bottom of the dumpster to verify that it is plugged. Inspect the spill kits to verify completeness of contents. Notes: No Concerno



• 4	are the Best Management Practices the facility agreed to being used? The Best Management Practices effective? The there any additional management practices that should be implemented?
Notes: _	No Concomi
5. Othe	r observations – take note of anything else at the Property that may be of significance to the
	EUPIC Project complete
Please of	ıtline the revisions and amendments that need to be made to the Stormwater Manage
rian.	anage to the Stormwater Manage
rian.	
This Storr the fi	annual inspection certification is to indicate our commitment and continual support for this number of the Stormweter Management Plan. An annual site inspection has been conducted and based on
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Annual Facility Site Compliance Inspection Report (AFSCI)

For Storm Water Discharge Associated With Industrial Activity Under Wisconsin Pollutant Discharge Elimination System (WPDES) Permit Form 3400-176 (R 6/05)

Page 1 of 4

Notice: This form is authorized by s. NR 216.29(2), Wis. Adm. Code. Submittal of a completed form to the Department is mandatory for industrial facilities covered under a tier 1 storm water general permit. Facilities covered under a tier 1 permit are not required to submit AFSCI reports after submittal of the second AFSCI report, unless so directed by the department. However, these inspections and quarterly visual inspections shall still be conducted and results shall be kept on site for department inspection. Facilities covered under a tier 2 storm water general, industry-specific general or regulations may result in fines up to \$25,000 per day pursuant to s. 283.91, Wis. Stats. Personally identifiable information on this form may be used for other water quality program purposes.

State ZIP Code LUZ 54952 Person Accordance with s. 216.29(8), Wis. Adm. ETE, IT WILL BE RETURNED der my direction or supervision in accordance e the information submitted. Based on my inquin
Person Accordance with s. 216.29(8), Wis. Adm. ETE, IT WILL BE RETURNED der my direction or supervision in accordance
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er my direction or supervision in accordance
ETE, IT WILL BE RETURNED der my direction or supervision in accordance
ETE, IT WILL BE RETURNED der my direction or supervision in accordance
der my direction or supervision in accordance
e the Information submitted. Based on my inquing e for gathering the information, the information n aware that there are significant penalties for ing violations.
Date Signed
12-28-16
Telephone Number 397 4200
7.50
State ZIP Code
-

The first level of storm water monitoring consists of a comprehensive annual facility site compliance inspection (AFSCI) to determine if your facility is operating in compliance with your Storm Water Pollution Prevention Plan (SWPPP). You should use the results of this inspection to determine the extent to which your SWPPP needs to be updated to prevent pollution from new source areas, as well as to correct any inadequacies that the plan may have in handling existing source areas. This first level of monitoring is addressed in Section III of this Annual Report.

The second level of storm water monitoring consists of quarterly visual observations of storm water leaving the site during runoff events caused by snow-melt or rainfall. This is a practical, low cost tool for identifying obvious contamination of storm water discharges, and can also help identify which practices are ineffective. The goal of quarterly inspections is to obtain results from a set of four inspections that are distributed as evenly as possible throughout the year and which depict runoff quality during each of the four seasons. This second level of monitoring is addressed in Section IV of this Annual Report.

	DNR Use Only	
FIN		
FID		

Annual Facility Site Compliance Inspection Report (AFSCI) Form 3400-176 (R 6/05) Page 2 of 4

Append For the City City City City City City City City			Page 2 of 4
Annual Facility Site Compliance Inspection			
The Annual Facility Site Compliance Inspection shall be adequate to verify that; your Storm W remains current, potential pollution sources at your facility are identified, the facility site map at Best Management Practices prescribed in your SWPPP are being implemented, properly oper			
	Inspection Date	ory mairitain	ieu.
Employer .			
Employer	Telephone Number		
Your inspection should start with a review of your written SWPPP kept at your facility. The SW these inspections, you find that the provisions in your SWPPP are ineffective in controlling condischarged from your facility.	PPP should be an taminated storm w	nended if, the	rough eing
Has your SWPPP been updated to include current Non-Storm Water Discharge Evaluation results?	√ Yes	□No	□ N/A
Has your SWPPP been amended for any new construction that would effect the site map or drainage conditions at the facility?	Yes	□No	M/A
Has your SWPPP been amended for any changes in facility operations that could be identified new source areas for contamination of storm water?	as Yes	□No	√⊠ N/A
Are there any materials at the facility that are handled, stored, or disposed in a manner to allow exposure to storm water that are not currently addressed in your SWPPP?	Yes	∑ No	□ N/A
Are there any maintenance or material handling activities conducted outdoors that have not bee addressed in your SWPPP?	en Yes	⊠No	□ N/A
Are outside areas kept in a neat and orderly condition?	Yes	□No	□ N/A
Are regular housekeeping inspections made?	Yes	□ No	□ N/A
Do you see spots, pools, puddles, or other traces of oils, grease, or other chemicals on the ground?	Yes	⊠ No	□ N/A
Are particulates on the ground from industrial operations or processes being controlled?	Yes		
Do you see leaking equipment, pipes or containers?	Yes	No ⊠No	N/A
Do drips, spills, or leaks occur when materials are being transferred from one source to another	n Dyss	⊠ No	∐ N/A
Are drips or leaks from equipment or machinery being controlled?	? Yes		N/A
Are cleanup procedures used for spilled solids?	Yes Yes	∐ No	N/A
Are absorbent materials (floor dry, kitty litter, etc.) regularly used in certain areas to absorb spills	? Yes	_ ∐ No	∐ N/A
Can you find discoloration, residue, or corresion on the roof or ground years and it as a line of the control o		No	L N/A
or drain work areas?	te Yes	⊠ No	□ N/A
Are Best Management Practices implemented to reduce or eliminate contamination of storm water from source areas at the facility?	Yes	□No	□ N/A
Are Best Management Practices adequately maintained?	Yes	□No	□ N/A
Are there significant changes that will have to made to your SWPPP to correct any inadequacies hat the plan may have to effectively control a discharge of contaminated storm water from your acility?	Yes	₩ No	□ N/A
Comments:			

Annual Facility Site Compliance Inspection Report (AFSCI)

Form 3400-176 (R 6/05)

Page 3 of 4

Quarterly Visual Inspection Reports

Quarterly Visual Inspections at each storm water discharge outfall on your site can be a valuable assessment tool and are required by the Tier 1, Tier 2, and Nonmetallic Mining Industrial Storm Water General Permits. These inspections should be performed when sufficient runoff occurs during daylight hours. Try to make observations within the first 30 minutes after runoff begins discharging from the outfall or soon thereafter as practical, but no later than 60 minutes. If you find visible pollution, note the probable source and list any possible Best Management Practices that could be used to reduce or eliminate the problem. Make any necessary changes to your Storm Water Pollution Prevention Plan as needed. If you were unable to evaluate an outfall during a specific quarter, this should be indicated along with a reason as to why this could not be done.

		Date of Ins	spection	
Outfall Number	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
	3-8-16	4-28-16	9-27-16	12-28-16
	·			
		. 1		

Briefly summarize what you found when conducting your Quarterly Visual Inspections. (Include any observations of color, odor, turbidity, floating solids, foam, oil sheen, or any other indications of storm water pollution and the probable sources of any observed storm water contamination.)

Annual Facility Site Compliance Inspection Report (AFSCI)

Form 3400-176 (R 6/05)

Page 4 of 4

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Unless otherwise directed, mail this completed form to the DNR office listed by county as follows:

DNR Service Center

1401 Tower Avenue

Superior, WI 54880

Phone: (715) 392-7988

Northern Region Counties

Ashland Lincoln Barron Oneida Bayfield Polk Burnett Price Douglas Rusk Florence Sawyer Forest Taylor Iron Vilas Langlade Washburn

South Central Region Counties

Columbia Dane Dodge Grant Green Iowa

Jefferson LaFayette Richland Rock Sauk

DNR South Central Region 3911 Fish Hatchery Road Fitchburg, WI 53711

Phone: (608) 275-3266

Northeast Region Counties

Brown Marquette Calumet Menomonee Door Oconto Fond du Lac Outagamie Green Lake Shawano Kewaunee Waupaca Manitowoc Waushara Marinette Winnebago

DNR Northeast Region PO Box 10448 Green Bay, WI 54307

Phone: (920) 662-5100

Southeast Region Counties

Kenosha Milwaukee Ozaukee Racine

Sheboygan Walworth Washington Waukesha

DNR Southeast Region Stormwater Program 2300 N Dr Martin Luther King Jr Dr Milwaukee, WI 53212

Phone: (414) 263-8500

West Central Region Counties

Adams Juffalo Chippewa Clark Crawford Dunn Eau Claire Jackson Juneau La Crosse

Marathon Monroe Pepin Pierce Portage St. Croix Trempealeau Vernon Wood

DNR Service Center 5301 Rib Mountain Road Wausau, WI 54401

Phone: (715) 359-4522

Non-Stormwater Discharges

Facility I	nspected:			
Name: Location:	City of Appleton, Water Treatment Fac 2281 Manitowoc Road, Menasha, WI	ility 54952	4	
Evaluate place dur	all outfalls for non-stormwater discharged ing dry periods. Observations should be	s during normal busir made twice a year.	ness hours. Evaluatio	ns should take
OUTFALL	L 01			
Are there Are there Are there		ather flow? Yes Yes Yes Yes	No No No No	
If any que	estions were answered yes, briefly descri	be and state nossible	Solitos.	
		- and oldro poosible	- Source.	
Test Meth	nod: Visual Observation Overland	Other		
Inspected	by:			
(Signature	the state of the s			
Oignature	2) XXXX			
Name:	Brish Kreski			
	Brish Kreski' 3-8-16		·	· .
Name:	Brigh Kreski' 3-8-16			

Quarterly Visual Inspection - Field Sheet

Form 3400-176A (R 3/01)

This form is for your own use and should be kept as part of your Storm Water Pollution Prevention Plan. It does not have to be submitted to the Department unless requested. If false information from quarterly visual inspections is reported to the Department, you could be subject to penalties up to \$10,000 pursuant to s. 283.91(4), Wis. Stats.

Use one form per outfall.

Quarterly Visual Inspections at each storm water discharge outfall on your site can be a valuable assessment tool and are required by the Tier 1 and Tier 2 Industrial Storm Water General Permits. This inspection should be performed when sufficient runoff occurs during daylight hours. Try to make observations within the first 30 minutes after runoff begins discharging from the outfall, or as soon as practical, but no later than 60 minutes. If you find visible pollution, note the probable source and list any possible Best Management Practices that could be used to reduce or eliminate the problem.

acility Name Appleton V	Water Tı	reatment	Plant					,
treet Address 2281 Mani				City Me:	nasha		State WI	ZIP Code 54952
lame of Person Cond	ducting Inspect	lion				Inspection		,
Brian	Les Ki				•	S &	9-16	
Employer						920		De Sylffer
Outfall Number (make	reference to s	site map) Desc	cription of Outfall	(e.g., ditch, concret	e pipe, grassed s	wale, etc.)		
001			Concret					
Fime of Rainfall Even OBOO Describe your obse being discharged froam, oil sheen or a contamination.	ervations, An e	e of Visual Insp 300 easy way to c y and visually ual indicators	onduct this ins	nmul rain pection is to use a	glass jar to colle	ect a samp	<i>cn o</i> ∳ le of the turbidity	earest tenth of an inch) From 1877 Storm water 5724 The footing solids, Storm water
Color:	Clear	Red	Yellow	Brown	Other:			
Odor:	None	Musty	Sewage	Rotten Egg	Other:			
Clarity:	Clear	Cloudy	Opaque	Suspended So	olids Other:			
		Foam	Garbage	Oily Film	Other:			
Floatables:	None	Lilivain						
Floatables: Deposits / Stains:			Sludge	Sediments	Other:			// //
			Sludge 3/4 ;	Sediments Fill Cla	Other:	of Zound	51	now mult
			Sludge 3/4 7 aroune	Sediments Fall Cla	Other:	of Zonel	57	now must
			Sludge 3/4 7 around	Sediments Fill Cla	Other:	in.	57	gas melt
			Sludge 3/4 3	Sediments Full Cla	Other:	in .	5)	gas melt
			Sludge 3/4 3 around	Sediments Full Cla	Other:	·	57	gas melt
			Sludge 3/4 3 around	Sediments Fill Cla	Other:	12-1 ·	- 57 - 57	jour melt

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Ctroot Address		Treatmer	TC PIAIIC						
Street Address 2281 Mai				City Me	nasha		State WI	ZIP Code 54952	
Name of Person Conducting Inspection Bolan Kresk					Inspe		spection Date		
Employer C. Ly	of An	eleten				Telephone	Number	9-16	
Outfall Number (ma	ake reference	to site map) De	scription of Out	fall (e.g., ditch, concrete	pipe, grassed s	wale etc.)	- 6	· 3 - 3 - 5 / 6	
001			Concr	ete Pipe	1,11,01				
Time of Rainfall Eve	ent T	ime of Visual In	spection (Optional: Amount of R	ainfall at the Tim	e of Observa	ation (nea	arest tenth of an inc	
Describe your obs peing discharged oam, oil sheen or contamination.	servations, A from the faci any other vi	n easy way to lity and visually sual indicators	conduct this ir inspect the v of storm wate	reportion is to use a govater. Include any obserpollution and the pro	lass jar to colle	ct a sample lor, odor, tu of any obse	of the s irbidity, t	torm water loating solids, rm water	
Color:	Clear	Red	Yellow	Brown	Other:				
Odor:	None	Musty	Sewage	Rotten Egg	Other:				
Clarity:	Clear	Cloudy	Opaque	Suspended Solid					
loatables:	None	Foam	Garbage		Other:			,	
eposits / Stains:	None	Oily	Sludge	Sediments	Other:				
omments:	- lots	0 F 10		Doed at		4 04		ust fall	
auri	ww.				/				
dam									
earn									
·									

Quarterly Visual Inspection - Field Sheet

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Facility Name Appleton	Water	Treatm	ent Plant						
Street Address 2281 Man	Ltwoc	Rd.	<u> </u>		City M∈	nasha		State WI	ZIP Code 54952
lame of Person Conducting Inspection Brian Kves Ki				100		Inspection	27-1	16	
Employer (4 + 4 + 4 + 4 + 4 + 4 + 4 + 4 + 4 + 4	O.f.	Ago le-	, .						932-23/6
Outfall Number (mak 001	e referenc	e to site map)		utfall (e.g., d rete Pi		te pipe, grasse	d swale, etc.)		
Time of Rainfall Ever	nt	Time of Visua	•	Optional:	Amount of I		Time of Obser	vation (ne	arest tenth of an inch
Describe your obsetted being discharged from, oil sheen or a contamination.	om the fa	An easy way cility and visu	to conduct this ally inspect the	water. Inc	is to use a lude any ol	glass jar to co	f color, odor.	turbidity.	floating solids.
Color:	Clea	ar Red	Yellow	Bro	own	Othe	r:		
Odor:	Non	e Mus	ty Sewag	e Ro	tten Egg	Other	r:		
Clarity:	Clea	ar Clou	dy 🔲 Opaqu	e Su	spended Sc	lids Other	r:		
Floatables:	Non	e Foar	m Garba	ge 🗌 Oil	y Film	Other	•		
Deposits / Stains:	Non	e Oily	Sludge	Se	diments	Other	:		
Comments:	reg (, min	attern f	Frier	taken	tes f	oresea	nghire	
							١		
This outfall could no	t be evalu	ated during t	his quarter due	to the follo	wing reaso	n:	· · · · · · · · · · · · · · · · · · ·		

Non-Stormwater Discharges

	Facility Inspected:
	Name: City of Appleton, Water Treatment Facility Location: 2281 Manitowoc Road, Menasha, WI 54952
	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
	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 Other observations:
	If any questions were answered yes, briefly describe and state possible source:
1	Test Method: Visual Observation - Overland Other
:	Inspected by: (Signature)
	Name: Brian Kreski
	Date: 4-27-16
	Time: /200
	- Catchbasin on North side of Plant and North
	grating + voilt.
	gratery of that I



Quarterly Visual Inspection - Field Sheet

Form 3400-176A (R 3/01)

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•	ry changes to	o your Storm '	Water Pollutio	n Prevention P	lan as needed.			
Facility Name Appleton	Water 1	reatment	: Plant					
Street Address 2281 Manitwoc Rd.				City	City Menasha		State WI	ZIP Code 54952
Name of Person Conducting Inspection Brian Kees Ke						Inspection Date 12-28-/C		
Employer (ity of Appleton Outfall Number (make reference to site map) Description of Outfall (e.g., ditch, concrete pipe, grasse						Telephone Number		
Outfall Number (mak	e reference to	site map) Des	cription of Outfa Concre	ll (e.g., ditch, con te Pipe	crete pipe, grassed s	swale, etc.)		
Time of Rainfall Ever /226/ Describe your obse being discharged froam, oil sheen or contamination.	ervations, An	ty and visually	onduct this ins	Cain 12-26 spection is to use ater. Include any	observations of c	ect a samplolor, odor, t	e of the sturbidity,	storm water floating solids,
Color:	Clear	Red	Yellow	Brown	Other:	X :		
Odor:	None	Musty	Sewage	Rotten Egg	Other:	*	-	
Clarity:	Clear	Cloudy	Opaque	Suspended	Solids Other:	议		
Floatables:	None	Foam	Garbage	Oily Film	Other:	X		
Deposits / Stains:	None	Oily	Sludge	Sediments	Other:	X		
Comments:	· Un al	ile fo	ACC	ess 6	net fall			