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.

Make any necessar	ry change:	s lo your Sto	rm Water Pollu	ition Preven	tion Plan a	is needed.			
Facility Name	****		^						
MUNICIP	AL S	ERVICE	BUILDI	VG					•
Street Address					City			State	ZIP Code
2625 EAS			E AVEN	IUE	APPL	ETON		WI	54911
Name of Person Con	ducting Ins	spection					Inspection D	ate	
Employer					·		Telephone N	umber	
Outfall Number (mak	e reference	to site map)	Description of Ou	ıtfall (e.g., dito	h. concrete	pipe, grassed s	wale, etc.)		
1			STORM				,,,		
Time of Rainfall Ever	ıt	Time of Visua	l Inspection	Optional: A	mount of Ra	infall at the Tim	e of Observat	ion (nea	rest tenth of an Inch)
Describe your obsetted being discharged for foam, oil sheen or a contamination.	om the fa	cility and visu	ally inspect the	water, include	de any obs	ervations of co	lor, odor, tur	bidity, f	loating solids.
Color:	Clea	r Red	Yellow	Brow	/n	Other:			
Odor:	None	e Must	ly Sewag	e Rotte	n Egg	Other:	,		
Clarity:	Clea	r Clou	dy Dpaqu	e Susp	ended Solid	s Other:			
Floatables:	None	∍ ∏ Foar	m Garbag	je Oily I	Film	Other:			
Deposits / Stains:	None	oily	Sludge	Sedir	ments	Other:			
Comments:									
	•								
This outfall could no	t be evalu	ated during t	his quarter due	to the following	ng reason:		· · · · · · · · · · · · · · · · · · ·		
			-		-				

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.

MUNICIPA Street Address 2625 EAS Name of Person Conde				ra e					
				City	,			State	ZIP Code
	T GLE	LIACINE	- AVENU	, ,	PPLE	TON		WI	54911
				, n			Inspection	Date	
Employer	 .	······································					Telephone	Number	
Outfall Number (make	reference to	site map) De	scription of Outfa	ll (e.g., ditch, c	oncrete pip	e, grassed s	wale, etc.)	· ·	
2		() VERLAN	ID FLOI	N TO	SW	INLE	T3	
Time of Rainfall Event	Tim	e of Visual In	spection Or	otional: Amou	nt of Rainfa	all at the Tim	e of Observ	ation (nea	rest tenth of an ir
Describe your observableing discharged from foam, oll sheen or an contamination.	m the facility	y and visuali	y inspect the wa	iter. Include a	ny observ	ations of co	olor, odor, t	urbidity, f	loating solids,
Color:	Clear	Red	Yellow	Brown		Other:			
Odor:	None	Musty	Sewage	Rotten E	99	Other;			
Clarity:	Clear	Cloudy	Opaque	Suspend	ed Solids	Other:			
Floatables:	None	Foam	Garbage	Oily Film		Other:			
Deposits / Stains:	None	Oily	Sludge	Sedimen	is	Other:			
Comments:									
This outfall could not	In a second	al division a thi-	anadas des la	the following -	22222				

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.

Make any necessary changes to your Storm Water Pollution Prevention Plan as needed.

Street Address			BUILDING	City		Sta	ate	ZIP Code
2625 EAS	T GU	ENDALE	AVENI	E APPLI	ETON	1	エ	54911
Name of Person Con						Inspection Dat		
Employer						Telephone Nu	mber	
Outfall Number (make	e reference to	site map) Des	cription of Outfa	l (e.g., ditch, concrete p	ipe, grassed s	l wale, etc.)		
3		0	VERLANI	D FLOW TO	DRAIN	AGE SW	ALE	E (FUTURE!
Time of Rainfall Even	t Tin	ne of Visual Ins		otional: Amount of Rai				
being discharged fr	om the facilit	ly and visually	inspect the wa	pection is to use a gla ter. Include any obse pollution and the prob	rvations of co	lor, odor, turbi	idity, fl	loating solids,
Color:	Clear	Red	Yellow	Brown	Other:			
Odor:	None	Musty	Sewage	Rotten Egg	Other:		· · · · · · · · · · · · · · · · · · ·	, ————————————————————————————————————
Clarity:	Clear	Cloudy	Opaque	Suspended Solids	Other:		, ,	
Floatables:	None	Foam	Garbage	Olly Film	Other:			
Deposits / Stains:	None	Oily	Sludge	Sediments	Other:			
Comments:								
		ı	•					

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.

Make any necessary changes to your Storm Water Pollution Prevention Plan as needed. Facility Name MUNICIPAL SERVICE BUILDING Street Address City State ZIP Code 2625 EAST GLENDALF AVENUE 54911 Name of Person Conducting Inspection Inspection Date Telephone Number Employer Outfall Number (make reference to site map) Description of Outfall (e.g., ditch, concrete pipe, grassed swale, etc.) SW INLETS Optional: Amount of Rainfall at the Time of Observation (nearest tenth of an inch) Time of Rainfall Event Time of Visual Inspection Describe your observations. An easy way to conduct this inspection is to use a glass jar to collect a sample of the storm water being discharged from the facility and visually inspect the water. Include any observations of color, odor, turbidity, floating solids, foam, oil sheen or any other visual indicators of storm water pollution and the probable sources of any observed storm water contamination. Other: Clear Red Yellow Brown Color: Cther: Odor: Musty Sewage Rotten Egg None Clarity: Cloudy Suspended Solids Other: Clear __ Opaque Foam Garbage Oily Film Other Floatables: None Oily Sediments Deposits / Stains: None Other: Sludge Comments: This outfall could not be evaluated during this quarter due to the following reason:

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.

Make any necessary changes to your Storm Water Pollution Prevention Plan as needed. Facility Name MUNICIPAL SERVICE BUILDING City State ZIP Code APPLETON ω_{I} 54911 2625 EAST GLENDALE AVENUE Inspection Date Name of Person Conducting Inspection Telephone Number Employer Outfall Number (make reference to site map) Description of Outfall (e.g., ditch, concrete pipe, grassed swale, etc.) 5 SW INLETS Optional: Amount of Rainfall at the Time of Observation (nearest tenth of an inch) Time of Rainfall Event Time of Visual Inspection Describe your observations. An easy way to conduct this inspection is to use a glass jar to collect a sample of the storm water being discharged from the facility and visually inspect the water. Include any observations of color, odor, turbidity, floating solids. foam, oil sheen or any other visual indicators of storm water pollution and the probable sources of any observed storm water contamination. Red Yellow Brown Other: Color: Clear Rotten Egg Odor: Musty Sewage Other: None Suspended Solids . Other: Opaque Clarity: Clear Cloudy Foam Oily Film Other: Floatables: None Garbage Oily Other: Deposits / Stains: None Sludae Sediments Comments: This outfall could not be evaluated during this quarter due to the following reason:

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.

Make any necessary changes to your Storm Water Pollution Prevention Plan as needed.

MUNICIPAL SERVICE BUILDING Cilv State ZIP Code 2625 EAST GLENDALE AVENUE WI 54911 Name of Person Conducting Inspection Inspection Date **Employer** Telephone Number Outfall Number (make reference to site map) Description of Outfall (e.g., ditch, concrete pipe, grassed swale, etc.) OVERLAND 6 DRAINAGE FLOW TO Time of Rainfall Event Time of Visual Inspection Optional: Amount of Rainfall at the Time of Observation (nearest tenth of an inch) Describe your observations. An easy way to conduct this inspection is to use a glass jar to collect a sample of the storm water being discharged from the facility and visually inspect the water. Include any observations of color, odor, turbidity, floating solids. foam, oil sheen or any other visual indicators of storm water pollution and the probable sources of any observed storm water contamination. Color: Clear Red Yellow Brown Other: Odor: _ Musty None Sewage _ Rotten Egg Other: Clarity: Cloudy Opaque Suspended Solids Other: Clear Floatables: __None Foam __ Garbage Other: Oily Film Oily Deposits / Stains: None Other; Sludge Sediments Comments: This outfall could not be evaluated during this quarter due to the following reason:

Stormwater Management Plan Municipal Service Building and Hardstand Site

City of Appleton, Wisconsin

Report

Non-Stormwater Discharges

Facility Inspected:

Name:

City of Appleton, Municipal Service Building and Hardstand

Location: 2625 East Glendale Avenue and 3300 E. Glendale Avenue, Appleton, WI 54911

OUTFALL 01			
Is there currently water flow or evidence of dry weather flow?	Yes	N	lo
Are there stains or coloring?	Yes		
Are there sludges?	Yes		lo
Are there odors?	Yes		lo
Other observations:	103	,	
If any questions were answered yes, briefly describe and state p		e:	
Test Method: Visual Observation Ot	her		
OUTFALL 02			
Is there currently water flow or evidence of dry weather flow?	Yes	N	lo
Are there stains or coloring?	Yes	***************************************	lo
Are there sludges?	Yes		Jo
Are there odors?	Yes	•	lo
Other observations:			
If any questions were answered yes, briefly describe and state p	ossible sourc	e:	
Test Method: Visual Observation Of	her		-
OUTFALL 03			
Is there currently water flow or evidence of dry weather flow?	Yes	N	lo
Are there stains or coloring?	Yes	N	10
Are there sludges?	Yes	N	No
Are there odors?	Yes	N	lo
Other observations:			
If any questions were answered yes, briefly describe and state p	ossible sourc	e:	

Stormwater Management Plan Municipal Service Building and Hardstand Site

City of Appleton, Wisconsin Report Test Method: Visual Observation Other **OUTFALL 04** 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 Other **OUTFALL 05** 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 Other **OUTFALL 06** Is there currently water flow or evidence of dry weather flow? Yes Are there stains or coloring? Yes No Are there sludges? Yes No Are there odors? Yes No Other observations:

Other

Test Method: Visual Observation

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

Stormwater Management Plan Municipal Service Building and Hardstand Site

City of Appleton, Wisconsin		Report
Basin 7 at Hardstand Site		
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:		OFFICE OCCUPANTS
If any questions were answered yes, briefly describe and state po	essible source:	
Test Method: Visual Observation Oth	ner	
Basin 8 at Hardstand Site		
Is there currently water flow or evidence of dry weather flow?	Yes	No
Are there stains or coloring?		No
Are there sludges?	Name of Street, Street	
Are there odors?		No No
Other observations:	103	110
If any questions were answered yes, briefly describe and state po		
Test Method: Visual Observation Oth	ner	
Basin 9 at Hardstand Site		
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? Other observations:	Yes	No
If any questions were answered yes, briefly describe and state po	ossible source:	
Test Method: Visual Observation Off		
Inspected by: (Signature)		-
Name:		-
Date: Time		

ANNUAL SITE INSPECTION CHECKLIST

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?

 Notes:

 2. Check for any potential pollution sources. These sources may include the following:
 - Inspect the equipment and material storage areas. Is there any indication of oils, greases, or organic debris in the areas?
 - Inspect the area near the refuse dumpsters.
 - Inspect the used oil drop-off area, and recycling bin areas.
 - · Inspect areas around the Salt Storage Shed.
 - 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 (oil, resins, etc.) or other contaminants.

Notes: _	 			



3.	Perform the following preventive maintenance activities:
	Inspect the dumpsters and recycle bin covers for proper operation.
	Inspect the drain openings located in the bottom of the dumpsters to verify that they are plugged.
Not	es:
_	
<u> </u>	
4.	Review the Best Management Practices that have been used.
	Are the Best Management Practices the facility agreed to being used?
	Are the Best Management Practices effective?
	Are there any additional management practices that should be implemented?
Not	
	es:
_	
5.	Other observations – take note of anything else at the Property that may be of significance to the Stormwater Management Plan.
No	les:
_	
	
Ple Pla	ase outline the revisions and amendments that need to be made to the Stormwater Management
Pla	In.

This annual inspection certification is to indicate our commitment and continual support for this Stormwater Management Plan. An annual site inspection has been conducted and based on the findings from the inspection, the Stormwater Management Plan for this facility will be amended accordingly.

Signed:	Printed Name:
Title:	Date:

Facility: Municipal Service Building

2625 É. Glendale Avenue Appleton, WI 54911

Hardstand Site

3300 E. Glendale Avenue Appleton, WI 54911



Sormwater Management Plan Municipal Service Building and Hardstand Site City of Appleton, Wisconsin

Report

EMPLOYEE TRAINING RECORD

	ļ	***		-		ŝ		-	ł						1
Attendees															
1														A CALL TO THE TAXABLE PROPERTY OF TAXABLE PROPERTY OF TAXABLE PROPERTY OF TAXABBE PROPERTY OF TAXA	
														AN WEAR WATER	
Date of Training															- Control War
Date of														The state of the s	
Used		N V A NINGER PARKAN PANKAN PAN				MATERIAL MAT						V. C. F.		And a description of a first of a state of the state of t	
Training Materials Used	<u>.</u>			With the state of	AND AND THE RESIDENCE OF THE PROPERTY OF THE P	NA A ANALY TO A LIFE TO THE CONTROL OF THE CONTROL	manasa sadiman i a i shi kadhi i shikan ki katan ka Yi ka kadhi		A CANNON A Department (ANNA LLITTER)		NAMES OF THE PROPERTY OF THE P	A A A A A A A A A A A A A A A A A A A		manded is the subject of the subject	
Trainir		A CARLINAN A V SARINAN A MANAGANA MANAGANA NA NANGANA MANAGANA NA NANGANA MANAGANA MANAGANA MANAGANA MANAGANA M	- Common o c	are commanded accommandation and the formulation of the commandation and	ratherens soundard whereachide south white to the	erendőserő á árazó mátara defenserá nazó azó azot a	A CAMACA CA AND A CALLACTURE OF A CAMACA CA AND A CAMACA CALLACTURE OF A CAMACA CALLACTURE		rapaga () i sugar arasan sa cara ang kang akka akka sa kana a	A control of the cont	A markka allelakk as halakkakkakkanelakka markka karan	es manages and in the of his day had			
		VAN OMBRAYAN BANKANAN AND AND AND AND AND AND AND AND AND	The state of the s	And a supply of the supply of	Add to the first to the first programme on the commencer construction of the first programme of of		e control e control ad Advanda a Advanda e Control e Con		and the control of th		NATIONAL PROPERTY OF THE PROPE	aria) wife a desiration destinant total states and well arial and a states and a state and a states and a state and a s			
Training Topics		VIIIA AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	THE RESIDENCE OF THE PARTY OF T		ene saas saas saas saas sa dhi saadhii dhadha sabaha shaadhadha dhadha	THE STATE OF THE S	The second district of		100 mm 1			THE STATE OF THE S	populationment and an above found throughout furtherminal	material gradual and formulas is a data is a factor and white and a factor and a fa	
Trai				TOTAL OF THE STATE	a a debición cardinha acada, acuar debición da acuarda debición de acuarda debición debición de acuarda debición de acuarda debición debició	ALTERNATION OF THE PROPERTY OF						e A V dia anni P A anni anni A Nadia anni	i y za komuni za jedna ka kalaka ka	man à describ à radi e c, è s mitta per la destructura de company	
<u>L_</u>				1	<u> </u>				}	Ļ		*******	1	-	

Trainer Company	
Trainer Signature	
Trainer Name (Printed)	

Attach Training Materials With This Sheet

Date

SPILL DOCUMENTATION FORM

Instructions: All facilities issued a stormwater permit from the Wisconsin Department of Natural Resources must document all significant spills or leaks that occur at the site. The following format can be followed to document the necessary information.

	Record below all significant spills and significant leaks of pollutants that may possibly be exposed to stormwater.
Date:	
Time:	
Substance and V	olume spilled:
Weather condition	ns:
Duration of the in	cident:
Cause of the incid	dent:
_	
Response proced	lures:



Stormwater Management Plan Municipal Service Building and Hardstand Site City of Appleton, Wisconsin

Report

Potential for envir	onmental impact:	

