## PROJECT CONSTRUCTION STORMWATER REVIEW REPORT

ENV-WQP-0003 (Revised 10/2015)

Project Description Contract Number/CO/RTE/PM

District

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**WDID Number** 

Project Name

### **Review Report Summary**

Category No. of Finding  Plans and Permits  Training  SMARTS  Active Treatment Systems	
Training SMARTS	
SMARTS	
Active Treatment Systems	
Monitoring and Reporting	
Tahoe CGP Specific Requirements	
TOTAL	

Construction Site Best Management Practices (BMP)		
Category	No. of Findings	
Soil Stabilization		
Sediment Control		
Tracking Control		
Wind Erosion Control		
Non-Storm Water		
Waste Management	-	
TOTAL		

Kev	Personn	el
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IQA Reviewer Review Date

Resident Engineer (RE) RE Phone Number

**Review Participants** 

Construction Company Water Pollution Control Manager (WPCM)

**Site Conditions** 

Weather Conditions Project Risk Level / Tahoe CGP

Receiving Water Body (S) Percent Complete By Time

**Regulatory Status** 

SWPPP or WPCP RWQCB (S)

PLACS (Permits, Licenses, Agreements, Certifications) Specifying Temporary BMP Requirements

Oversight Project? Lead Agency

# PROJECT CONSTRUCTION STORMWATER REVIEW REPORT

ENV-WQP-0003 (Revised 10/2015)

**SUMMARY OF FINDINGS AND CORRECTIVE ACTION STATUS** 

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			_
Stormwater	Contract	Administration	Summary

Finding No. Finding Description Summary Corrected? Date of CA Completion

Construction Site BMP Summary

Finding No. Finding Description Summary Corrected? Date of CA Completion

### STATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION

# PROJECT CONSTRUCTION STORMWATER REVIEW REPORT

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	STORMWATER CONTRACT	ADMINISTRATION REVIEW	
Finding No.	Administrative Category		Checklist Question No.
Observation			
Standard Reference			
Standard			
Corrective Action Taken			
Date Completed	Verified By (Print name and title)		

## STATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION

# PROJECT CONSTRUCTION STORMWATER REVIEW REPORT

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CONSTRUCTION SITE BMP REVIEW					
Finding No. BMP Cate	egory	ВМР Туре		Checklist Question #	Location
Standard Reference S	tandard				
Observation:					
Corrective Action Take	an:				
Corrective Action Take	511.				
Date Completed:	Verified By (Pr	int Name and Title):			

#### STATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION

### PROJECT CONSTRUCTION STORMWATER REVIEW REPORT

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#### **Review Report Certification**

I certify under penalty of the law that this Project Construction Stormwater Review Report was performed in accordance with the Construction General Permit. The information contained in this Review Report was gathered from a field site review. I am aware that Section 309 (c)(4) of the Clean Water Act provides for significant penalties, including fines and imprisonment for knowingly submitting false material statement, representation, or certification.

IQR Reviewer Name	Date of Report Completion		
IQR Reviwer Signature			
Corrective Acti	on Certification		
Corrective Activ	on Certification		
for all findings identified in the Project Construction Stormwate	en implemented in accordance with the Construction General Permit er Review Report. I am aware that Section 309 (c)(4) of the Clean I imprisonment for knowingly submitting false material statement,		
Corrective Action Verifier Name	Detail Corrective Actions Completed		

Corrective Active Verifier Signature

This Project Construction Stormwater Review Report (Report) assist CalTrans HQ DEA-WQP with implementing the construction site self-Audit Program required by the CalTrans NPDES Permit (refer to CalTrans Construction Compliance Evaluation Plan (CCEP) CTSW-PL-15-321.02, February 2015-REVISED).

Instructions for completion of each field can be found by hovering the respective field. The Report Completion Process is:

- 1. IQR Review The Independent Quality Assurance (IQA) Reviewer provides entries on the Report from observations made during the Construction Site Stormwater Review. The IQA Reviewer then signs a hard copy of the completed Report and, after a quality control check by IQA Management Staff, submits to the Resident Engineer (RE) and the District Construction Stormwater Coordinator (DCSWC). The IQA Reviewer then selects from the respective pull down menu and inserts the statement, "Original signed by" followed with their first and last name and date (MM/DD/YYYY) in the Report field "IQR REVIEWER SIGNATURE." THE IQR Reviewer clicks the "Lock" button and emails the Report to the RE, Senior RE, Construction Manager, DCSWC, and DEA-WQP.
- 2. Corrective Action Documentation After all corrective actions have been completed and documented, the RE verifies and documents successful completion of corrective actions(s) with a signatures on the original review report. The signed copy will be submitted to the DCSWC and DEA-WQP. Then the RE selects from the respective pull down menu and inserts the following statement "Original signed by" followed with their first and last name and date(MM/DD/YYYY) in the form field "CORRECTIVE ACTION VERIFIER SIGNATURE". The RE then clicks the "Lock" button and emails the Report to the Senior RE, Construction Manager, DCSWC and DEA-WQP.