C62 STORMWATER SITE AUDIT CHECKLIST

This checklist is to be completed by the Owner for site audits of construction sites that disturb an acre or more. The Site Auditor's role is to ensure that the construction site is generally in compliance with the TN Construction General Permit (CGP) and any stream permits, such as an Aquatic Resources Alteration Permit (ARAP) or Corps of Engineers permit. The Site Auditor should complete the appropriate response for each item in the checklist and communicate the audit results to the Designer and Owner Project Manager. If the Site Audit indicates that item(s) are not in compliance with the CGP, additional enforcement steps should be considered. The Audit should be conducted at least monthly during active construction.

GENERAL PROJECT INFORMATION

Item Number	The following general project information may be completed by the Site Audit Representative prior to the Site Audit.	
1	Site Name:	
2	Plans Date:	
3	Project Size (acres):	Area of disturbance (acres):
4	NPDES Construction Stormwater Permit Tracking Number:	Site's Design Storm Event Rainfall Amount (inches):
5	List of Other Water Quality-Related Site Permits (if any):	
6	Does the Project Discharge to Impaired or Exceptional TN Waters? ☐ Yes ☐ No	
7	Are Quality Assurance Site Assessments Required for this Site? ☐ Yes ☐ No	

PERMIT AND SWPPP DOCUMENTATION

Item Number	Items to be checked by Owner's Site Audit Representative during a Construction Site Audit.		No
8	Are the site's permits currently effective (i.e., no expired permits)? (ARAP, CGP)		
9	Is the NPDES permit posted near the main entrance of the construction site where it is accessible to the public?		
10	Is the SWPPP located on site and current?		
11	Does the site have written rainfall records? ☐ If using onsite gage, how many days since the last audit was the gaged rain data recorded? ☐Reference site (location) If using a reference site, how many days since the last audit was the reference site rain data recorded?		
12	Do the site's rainfall records include any rain events where the recorded rainfall amount exceeded the ☐ 2yr, 24hr equivalent intensity ☐ 5yr, 24hr equivalent intensity		
13	Are inspections performed twice a week at least 72 hours apart? Was the TDEC inspection form used?		
14	Were the site's inspections performed by a qualified inspector? Level I certification number of inspector:		
15	Do the inspection reports require maintenance to be completed?		
16	Were maintenance items addressed within 7 days or before the next rain event?		
17	If SWPPP modifications were needed, were the SWPPP modifications implemented within 14 days after the need was identified in an inspection?		

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Item Number	Items to be checked by Owner's Site Audit Representative during a Construction Site Audit.	Yes	No
18	Do the inspection reports indicate that the site discharges caused an objectionable color contrast in a receiving stream?		
	If "Yes", note the affected location(s) in comments section below.		
19	Are quality assurance site assessments being conducted as required? (Or self-audits for a Campus with an MS4 Permit.)		
20	Is documentation of the Quality Assurance Site Assessments contained with the SWPPP? (Or self-audits for a Campus with an MS4 Permit.)		
SITE CH	ECK		
For items	checked "No." provide additional information in the next section.		

Item Number	Spot check the following items:	Yes	No
21	Are measures in place to prevent sediment from leaving the site?		
22	Are measures maintained and functioning?		
23	Is a construction exit in place?		
24	Are disturbed areas stabilized after being idle for 14 days? (Not applicable for active disturbances.)		
25	Are stream buffers protected and undisturbed? For Waters with Unavailable Parameters or Exceptional TN waters, the average buffer width is 60'. For all other streams, the average stream buffer is 30'. Minimums are 30' and 15'.		

Site Audit Representative Additional Comments and Notes		
_	e Certification: I certify that I completed this site audit checklist document and ese items document the findings of the site audit based upon my observations.	
Site Auditor Name (Print):		
Site Auditor Signature:		
Date:		