

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Name of Facility: Caldwell Industrial Airport NPDES Tracking No. IDR 050007

Outfall Name: AP-02 "Substantially Identical Discharge Point"? Yes (identify substantially identical outfalls): AP-04, 06, 09, 10, 11, 08
 No

Person(s)/Title(s) collecting sample: Ashley Newbry, Asst. City Engr.

Person(s)/Title(s) examining sample: "

Date & Time Discharge Began: _____ Date & Time Sample Collected: _____ Date & Time Sample Examined: _____

Rain @ 6:00 AM
5/22/21
No Sample / No Discharge

Substitute Sample? No Yes (identify quarter/year when sample was originally scheduled to be collected):

Nature of Discharge: Rainfall Snowmelt

If rainfall: Rainfall Amount: No of inches 0.31" Previous Storm Ended > 72 hours Before Start of This Storm? Yes No* (explain):

Pollutants Observed

- Color None Other (describe): _____
- Odor None Musty Sewage Sulfur Sour Petroleum/Gas Solvents Other (describe): _____
- Clarity Clear Slightly Cloudy Cloudy Opaque Other
- Floating Solids No Yes (describe): _____
- Settled Solids** No Yes (describe): _____
- Suspended Solids No Yes (describe): _____
- Foam (gently shake sample) No Yes (describe): _____
- Oil Sheen None Flecks Globs Sheen Slick Other (describe): _____
- Other Obvious Indicators of Stormwater Pollution No Yes (describe): _____

AP-02: No Discharge
AP-04: Not Inspected
AP-06: Not Inspected
AP-09: Discharge Not Collected
AP-10: Discharge Collected
AP-11: No Discharge
AP-08(new): Discharge Sampled
AP-08(old): No Discharge

* The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

** Observe for settled solids after allowing the sample to sit for approximately one-half hour.

* New AP-08 Filed in May 2021 NOI for MSGP to EPA.

AP-08(new) = [AP-08(old)] + [AP-09] + [AP-10] Combined @ outfall

Identify probably sources of any observed stormwater contamination. Also, include any additional comments, descriptions of pictures taken, and any corrective actions necessary below (attach additional sheets as necessary). Insert details

Certification Statement (Refer to MSGP Subpart 11 Appendix B for Signatory Requirements)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

A. Name: Ashley Newbry
C. Signature: Ashley Newbry

B. Title: Asst. City Engr
D. Date Signed: 5/24/2021

Q2
swales/
ponds

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Name of Facility: Caldwell Industrial Airport NPDES Tracking No. IDR 050007
 Outfall Name: AP-08 "Substantially Identical Discharge Point"? Yes (identify substantially identical outfalls):
 * NEW * No AP-02, 04, 06, 08 (old), 09, 10, 11
 Person(s)/Title(s) collecting sample: Ashley Newbry, Asst City Engr
 Person(s)/Title(s) examining sample: "

Date & Time Discharge Began: Rain @ 6:00 AM Date & Time Sample Collected: 7:12 AM Date & Time Sample Examined: 7:12 AM
5/22/21

Substitute Sample? No Yes (identify quarter/year when sample was originally scheduled to be collected):

Nature of Discharge: Rainfall Snowmelt

If rainfall: Rainfall Amount: No of inches Previous Storm Ended > 72 hours Yes No* (explain):
0.31" Before Start of This Storm?

Pollutants Observed

Color None Other (describe): Turbid
 Odor None Musty Sewage Sulfur Sour Petroleum/Gas
 Solvents Other (describe): _____
 Clarity Clear Slightly Cloudy Cloudy Opaque Other
 Floating Solids No Yes (describe): _____
 Settled Solids** No Yes (describe): _____
 Suspended Solids No Yes (describe): Sediment / turbidity
 Foam (gently shake sample) No Yes (describe): _____

*
 this outfall is
 new, per 2021 MSGP
 NOI - It represents
 overflow from
 BMP's AP-10, 09, 08
 *

Oil Sheen None Flecks Globs Sheen Slick
 Other (describe): _____

Other Obvious Indicators No Yes (describe): _____
 of Stormwater Pollution

* The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

** Observe for settled solids after allowing the sample to sit for approximately one-half hour.

Identify probably sources of any observed stormwater contamination. Also, include any additional comments, descriptions of pictures taken, and any corrective actions necessary below (attach additional sheets as necessary). Insert details

Corrective Action - Install further seed to facilitate
 vegetation of swale @ AP-08 (old) & AP-09

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A. Name: Ashley Newbry B. Title: Asst City Engr
 C. Signature: Ashley Newbry D. Date Signed: 5/24/2021