



September 14, 2012

Mr. Bruce Wolfe
Executive Officer
San Francisco Bay Regional Water Quality Control Board
1410 Clay Street Suite 1400
Oakland, CA 94612

Subject: Submittal of Annual Report for FY 11/12

Dear Mr. Wolfe:

In compliance with provision C.16 of the Municipal Regional Stormwater NPDES Permit No. CAS612008 (MRP), attached is the City of Belmont's Annual Report for FY 11/12.

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 gather and evaluate 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.

Afshin Oskoui, PE
Public Works Director

CITY OF BELMONT

FY 11/12 Annual Report

**California Regional Water Quality Control Board
San Francisco Bay Region**

Municipal Regional Stormwater NPDES Permit No. CAS12008

ATTACHMENT B

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Section 1 – Permittee Information

Background Information			
Permittee Name:	City of Belmont		
Population:	26,000		
NPDES Permit No.:	CAS612008		
Order Number:	R2-2009-0074R		
Reporting Time Period (month/year):	July / 2011 through June / 2012		
Name of the Responsible Authority:	Afshin Oskoui	Title:	Public Works Director
Mailing Address:	One Twin Pines Lane Suite 385		
City:	Belmont	Zip Code:	94002
		County:	San Mateo
Telephone Number:	650-595-7459	Fax Number:	650-593-8394
E-mail Address:	Aoskoui@belmont.gov		
Name of the Designated Stormwater Management Program Contact (if different from above):	Leticia Alvarez	Title:	Assistant Public Works Director/City Engineer
Department:	Department of Public Works		
Mailing Address:	One Twin Pines Lane Suite 385		
City:	Belmont	Zip Code:	94002
		County:	San Mateo
Telephone Number:	650-595-7469	Fax Number:	650-593-8394
E-mail Address:	Lalvarez@belmont.gov		

Section 2 - Provision C.2 Reporting Municipal Operations

Program Highlights and Evaluation

Highlight/summarize activities for reporting year:

Summary:

The following is a summary of Belmont’s activities for provision C.2

- 1) Participated in all Municipal Maintenance Subcommittee meetings in FY2011-12;
- 2) Perform weekly storm pump station inspections;
- 3) Participated in the March 2012 Graffiti Fighter Workshop in South San Francisco hosted by Stop Urban Blight; and
- 4) Performed two Corporation Yard BMP inspections.

In addition, refer to the C.2 Municipal Operations section of the countywide Program’s FY 11-12 Annual Report for a description of activities implemented at the countywide and/or regional level.

C.2.a. ► Street and Road Repair and Maintenance

Place an **X** in the boxes next to implemented BMPs to indicate that these BMPs were implemented in applicable instances. If not applicable, type **NA** in the box. If one or more of these BMPs were not adequately implemented during the reporting fiscal year then indicate so and provide explanation in the comments section below:

X	Control of debris and waste materials during road and parking lot installation, repaving or repair maintenance activities from polluting stormwater
X	Control of concrete slurry and wastewater, asphalt, pavement cutting, and other street and road maintenance materials and wastewater from discharging to storm drains from work sites.
X	Sweeping and/or vacuuming and other dry methods to remove debris, concrete, or sediment residues from work sites upon completion of work.

C.2.b. ► Sidewalk/Plaza Maintenance and Pavement Washing

Place an **X** in the boxes next to implemented BMPs to indicate that these BMPs were implemented in applicable instances. If not applicable, type **NA** in the box. If one or more of these BMPs were not adequately implemented during the reporting fiscal year then indicate so and explain in the comments section below:

X	Control of wash water from pavement washing, mobile cleaning, pressure wash operations at parking lots, garages, trash areas, gas station fueling areas, and sidewalk and plaza cleaning activities from polluting stormwater
NA	Implementation of the BASMAA Mobile Surface Cleaner Program BMPs

Comments:

City crews no longer power wash sidewalks and/or plaza’s where there is the possibility of wash water entering a storm drain. Walkways are only washed if the wash water runs off into landscaped areas. City staff also instructed the maintenance personnel who maintain the Belmont Train Station to no longer power wash the platform and concrete surfaces at the Caltrain Belmont Train Station. This was implemented in November of 2011.

Although the City has decided that sidewalks will only be washed if the wash water can run off into landscaping, City staff was trained in October 2011 on the Bay Friendly BMP's which include: Sweep, collect and dispose of debris. Dry clean oil spots with absorbent and dispose of absorbent as garbage. Place oil absorbent boom around storm drain. Wash water may go to storm drain through an oil-absorbent boom. No oil sheen should be visible on the water flowing into the storm drain.

C.2.c. ► Bridge and Structure Maintenance and Graffiti Removal

Place an **X** in the boxes next to implemented BMPs to indicate that these BMPs were implemented in applicable instances. If not applicable, type **NA** in the box. If one or more of these BMPs were not adequately implemented during the reporting fiscal year then indicate so and explain in the comments section below:

X	Control of discharges from bridge and structural maintenance activities directly over water or into storm drains
X	Control of discharges from graffiti removal activities
X	Proper disposal for wastes generated from bridge and structure maintenance and graffiti removal activities
X	Implementation of the BASMAA Mobile Surface Cleaner Program BMPs for graffiti removal
X	Employee training on proper capture and disposal methods for wastes generated from bridge and structural maintenance and graffiti removal activities.
X	Contract specifications requiring proper capture and disposal methods for wastes generated from bridge and structural maintenance and graffiti removal activities.

Comments:

The City has established requirements for proper graffiti removal during construction and ongoing bridge maintenance. The following clauses are incorporated in contract specifications related to painting over graffiti, power wash or using solvent removal:

- Cleaning water based or oil based paint from brushes or equipment within a contained area and shall not contaminate soil, watercourses, or storm drain systems. Paints, thinners, solvents, residues, and sludges that cannot be recycled or reused shall be disposed of as hazardous waste. When thoroughly dry, latex paint and paint cans, used brushes, rags, absorbent materials, and drop cloths shall be disposed of as solid waste.
- Power washing concrete surface: The contractor shall not allow construction site liquid waste, including the following to enter storm drain systems or watercourses- Liquid waste running off a surface including wash or rinse water, or other non-storm water liquids not covered by separate permits; and contractor shall hold liquid waste in structurally sound, leak proof containers such as sediment traps, roll-off bins, or portable tanks.
- Hazardous waste: Contractor shall implement hazardous waste management practices when waste is generated on the construction site from solvents if used for graffiti removal.

Contractor are also required to develop SWPPP and obtain General Construction Permit from the State.

C.2.d. ► Stormwater Pump Stations						
Does your municipality own stormwater pump stations:				<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
If your answer is No then skip to C.2.e.						
Complete the following table for dry weather DO monitoring and inspection data for pump stations. ¹ (add more rows for additional pump stations). If a pump station is exempt from DO monitoring, explain why it is exempt.						
Pump Station Name and Location	First inspection Dry Weather DO Data		Second inspection Dry Weather DO Data			
	Date	mg/L	Date	mg/L		
Harbor Pump Station. S/E corner of Harbor Blvd and El Camino Real	August 4, 2011	6.65	August 23, 2011	6.91		
Ralston Storm Pump Station. N/W corner of Old County Road and Ralston Ave	August 4, 2011	3.18	August 23, 2011	3.12		
Summarize corrective actions as needed for DO monitoring at or below 3 mg/L. Attach inspection records of additional DO monitoring for corrective actions: No corrective actions needed because DO levels were above 3 mg/L.						
Summary: Attached: C.2.d. Stormwater Pump Station Inspections (Dry season and wet season)						
Complete the following table for wet weather inspection data for pump stations (add more rows for additional pump stations):						
Pump Station Name and Location	Date (2x/year required)	Presence of Trash (Cubic Yards)	Presence of Odor (Yes or No)	Presence of Color (Yes or No)	Presence of Turbidity (Yes or No)	Presence of Floating Hydrocarbons (Yes or No)
Harbor Pump Station. S/E corner of Harbor Blvd and El Camino Real	October 5, 2012	No	Yes	Yes	Yes	No
Harbor Pump Station. S/E corner of Harbor Blvd and El Camino Real	April 12, 2012	No	Yes	Yes	Yes	No
Ralston Storm Pump Station. N/W corner of Old County Road and Ralston Ave	October 5, 2012	No	Yes	Yes	Yes	No
Ralston Storm Pump Station. N/W corner of Old County Road and Ralston Ave	April 12, 2012	No	Yes	Yes	Yes	No

¹ DO monitoring is exempted where all discharge from a pump station remains in a stormwater collection system or infiltrates into a dry creek immediately downstream.

C.2.e. ► Rural Public Works Construction and Maintenance					
Does your municipality own/maintain rural ² roads:		<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
If your answer is No then skip to C.2.f.					
Place an X in the boxes next to implemented BMPs to indicate that these BMPs were implemented in applicable instances. If one or more of the BMPs were not adequately implemented during the reporting fiscal year then indicate so and explain in the comments section below:					
<input type="checkbox"/>	Control of road-related erosion and sediment transport from road design, construction, maintenance, and repairs in rural areas				
<input type="checkbox"/>	Identification and prioritization of rural road maintenance based on soil erosion potential, slope steepness, and stream habitat resources				
<input type="checkbox"/>	No impact to creek functions including migratory fish passage during construction of roads and culverts				
<input type="checkbox"/>	Inspection of rural roads for structural integrity and prevention of impact on water quality				
<input type="checkbox"/>	Maintenance of rural roads adjacent to streams and riparian habitat to reduce erosion, replace damaging shotgun culverts and excessive erosion				
<input type="checkbox"/>	Re-grading of unpaved rural roads to slope outward where consistent with road engineering safety standards, and installation of water bars as appropriate				
<input type="checkbox"/>	Inclusion of measures to reduce erosion, provide fish passage, and maintain natural stream geomorphology when replacing culverts or design of new culverts or bridge crossings				
Comments including listing increased maintenance in priority areas: The City does not own/maintain rural roads.					

² Rural means any watershed or portion thereof that is developed with large lot home-sites, such as one acre or larger, or with primarily agricultural, grazing or open space uses.

C.2.f. ► Corporation Yard BMP Implementation			
Place an X in the boxes below that apply to your corporations yard(s):			
<input type="checkbox"/>	We do not have a corporation yard		
<input type="checkbox"/>	Our corporation yard is a filed NOI facility and regulated by the California State Industrial Stormwater NPDES General Permit		
<input checked="" type="checkbox"/>	We have a current Stormwater Pollution Prevention Plan (SWPPP) for the Corporation Yard(s)		
Place an X in the boxes below next to implemented SWPPP BMPs to indicate that these BMPs were implemented in applicable instances. If not applicable, type NA in the box. If one or more of the BMPs were not adequately implemented during the reporting fiscal year then indicate so and explain in the comments section below:			
<input checked="" type="checkbox"/>	Control of pollutant discharges to storm drains such as wash waters from cleaning vehicles and equipment		
<input checked="" type="checkbox"/>	Routine inspection prior to the rainy seasons of corporation yard(s) to ensure non-stormwater discharges have not entered the storm drain system		
<input checked="" type="checkbox"/>	Containment of all vehicle and equipment wash areas through plumbing to sanitary or another collection method		
<input checked="" type="checkbox"/>	Use of dry cleanup methods when cleaning debris and spills from corporation yard(s) or collection of all wash water and disposing of wash water to sanitary or other location where it does not impact surface or groundwater when wet cleanup methods are used		
<input checked="" type="checkbox"/>	Cover and/or berm outdoor storage areas containing waste pollutants		
Comments: Attachments: C.2.f Corporation Yard Inspection Reports			
If you have a corporation yard(s) that is not an NOI facility , complete the following table for inspection results for your corporation yard(s) or attach a summary including the following information:			
Corporation Yard Name	Inspection Date (1x/year required)	Inspection Findings/Results	Follow-up Actions
Belmont Corporation Yard	October 12, 2011	All BMP's were in place and no deficiencies noted.	None needed
Belmont Corporation Yard	June 8, 2012	All BMP's were in place and no deficiencies noted.	None needed

Section 3 - Provision C.3 Reporting New Development and Redevelopment

C.3.b. ► Green Streets Status Report

(All projects to be completed by December 1, 2014)

On an annual basis (if applicable), report on the status of any pilot green street projects within your jurisdiction. For each completed project, report the capital costs, operation and maintenance costs, legal and procedural arrangements in place to address operation and maintenance and its associated costs, and the sustainable landscape measures incorporated in the project including, if relevant, the score from the Bay-Friendly Landscape Scorecard.

Summary:

The New Development and Construction Controls Chapter of the countywide Program’s FY11-12 Annual Report includes a description of the activities conducted at the countywide or regional level. Belmont currently does not have any green street projects.

C.3.b.v.(1) ► Regulated Projects Reporting Table

Fill in attached table **C.3.b.v.(1)** or attach your own table including the same information.

No regulated projects were approved in this reporting period.

C.3.iii(3) Low Impact Development Reporting

(For FY 11-12 Annual Report only) Report the method(s) of implementation of Provision C.3.c.i in the 2012 Annual Report. For specific tasks listed in Provision C.3.c.i. that are reported using the reporting tables required for Provision C.3.b.v, a reference to those tables is adequate.

We have modified local policies/procedures to require all regulated projects approved after December 1, 2011 to implement LID source control, site design and stormwater treatment requirements. We are using the following Program and BASMAA products to ensure LID implementation:

- LID Infeasibility/Feasibility Worksheets
- Biotreatment Soil Specifications
- Green Roof Specifications
- Impervious Surface Form
- Rainwater Harvesting Worksheet

C.3.e.v. ► Alternative or In-Lieu Compliance with Provision C.3.c.			
(For FY 11-12 Annual Report only) Did your agency make any ordinance/legal authority and procedural changes to implement Provision C.3.e.?	<input type="checkbox"/>	Yes.	<input checked="" type="checkbox"/> No
If yes, attach a copy of the ordinance/legal authority changes or provide a link to the document(s). Discuss any procedural changes made.			
(For FY 11-12 Annual Report and each Annual Report thereafter) Is your agency choosing to require 100% LID treatment onsite for all Regulated Projects and not allow alternative compliance under Provision C.3.e.?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/> No
Comments (optional):			

C.3.e.vi ► Special Projects Reporting			
1. Has your agency received, but not yet granted final discretionary approval of, a development permit application for a project that has been identified as a potential Special Project based on criteria listed in MRP Provision C.3.e.ii(2) for any of the three categories of Special Projects (Categories A, B or C)?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/> No
2. Has your agency granted final discretionary approval of a project identified as a Special Project in the March 15, 2012 report? If yes, include the project in both the C.3.b.v.(1) Table, and the C.3.e.vi. Table.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/> No
If you answered "Yes" to either question, 1) Complete Table C.3.e.vi . below. 2) Attach narrative discussion of 100% LID Feasibility or Infeasibility for each project.			

C.3.h.iv. ► Installed Stormwater Treatment Systems Operation and Maintenance Verification Inspection Program Reporting

(1) Fill in attached table C.3.h.iv.(1) or attach your own table including the same information.
Table C.3.h.iv filled out and attached.

(2) On an annual basis, provide a discussion of the inspection findings for the year and any common problems encountered with various types of treatment systems and/or HM controls. This discussion should include a general comparison to the inspection findings from the previous year.

Summary:

No new O & M Agreements were executed during this reporting period. City staff has reviewed the annual inspection report forms and inspected all development sites that have executed an O & M Agreement. City staff has reviewed annual report from the three developments that have a signed O & M Agreement. No new site that requires an O & M information sheets were constructed in this report period. During inspections, City staff did not find any deficiencies with the O & M measures installed.

(3) On an annual basis, provide a discussion of the effectiveness of the O&M Program and any proposed changes to improve the O&M Program (e.g., changes in prioritization plan or frequency of O&M inspections, other changes to improve effectiveness program).

Summary:

Staff has prepared a database file that can generate a list of sites with treatment measures installed and projects with outstanding permits. The projects are assigned to different staff members for inspections and to follow up for compliance with NPDES requirements.

The system has had much success thus far. The field inspectors can simply use the approved plans and list of conditions to look for any BMP measures in the field. Staff utilized a list that shows projects requiring erosion control to check for compliance. The program coordinator has the list of sites that have treatment measures installed and have an O & M Agreement. The coordinator then assigns inspectors for each location.

(4) During the reporting year, did your agency:

• Inspect all newly installed stormwater treatment systems and HM controls within 45 days of installation?	N/A	Yes	<input type="checkbox"/>	No
• Inspect at least 20 percent of the total number of installed stormwater treatment systems or HM controls?	X	Yes	<input type="checkbox"/>	No
• Inspect at least 20 percent of the total number of installed vault-based systems?	N/A	Yes	<input type="checkbox"/>	No

If you answered "No" to any of the questions above, please explain:

The City did not have any newly installed stormwater treatment systems approved for this reporting period.

The City did not have any installed vault-based systems.

The City inspected all existing treatment systems that have an O&M agreement.

C.3.b.v.(1) ► Regulated Projects Reporting Table (part 1) – Projects Approved During the Fiscal Year Reporting Period

Project Name Project No.	Project Location ⁹ , Street Address	Name of Developer	Project Phase No. ¹⁰	Project Type & Description ¹¹	Project Watershed ¹²	Total Site Area (Acres)	Total Area of Land Disturbed (Acres)	Total New Impervious Surface Area (ft ²). ¹³	Total Replaced Impervious Surface Area (ft ²). ¹⁴	Total Pre- Project Impervious Surface Area. ¹⁵ (ft ²)	Total Post- Project Impervious Surface Area. ¹⁶ (ft ²)
Private Projects											
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Public Projects											
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Comments: N/A-The City did not have any private or public regulated projects in this reporting period											

⁹ Include cross streets

¹⁰ If a project is being constructed in phases, indicate the phase number and use a separate row entry for each phase. If not, enter "NA".

¹¹ Project Type is the type of development (i.e., new and/or redevelopment). Example descriptions of development are: 5-story office building, residential with 160 single-family homes with five 4-story buildings to contain 200 condominiums, 100 unit 2-story shopping mall, mixed use retail and residential development (apartments), industrial warehouse.

¹² State the watershed(s) in which the Regulated Project is located. Optional but recommended: Also state the downstream watershed(s).

¹³ All impervious surfaces added to any area of the site that was previously existing pervious surface.

¹⁴ All impervious surfaces added to any area of the site that was previously existing impervious surface.

¹⁵ For redevelopment projects, state the pre-project impervious surface area.

¹⁶ For redevelopment projects, state the post-project impervious surface area.

C.3.b.v.(1) ► Regulated Projects Reporting Table (part 2) – Projects Approved During the Fiscal Year Reporting Period

Project Name Project No.	Application Deemed Complete Date ¹⁷	Application Final Approval Date ¹⁷	Source Control Measures ¹⁸	Site Design Measures ¹⁹	Treatment Systems Approved ²⁰	Operation & Maintenance Responsibility Mechanism ²¹	Hydraulic Sizing Criteria ²²	Alternative Compliance Measures ^{23/ 24}	Alternative Certification ²⁵	HM Controls ^{26/ 27}
Private Projects										
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Comments: N/A-The City did not have any regulated projects in this reporting period										

¹⁷ For private projects, state project application deemed complete date and final discretionary approval date. If the project did not go through discretionary review, report the building permit issuance date.

¹⁸ List source control measures approved for the project. Examples include: properly designed trash storage areas; storm drain stenciling or signage; efficient landscape irrigation systems; etc.

¹⁹ List site design measures approved for the project. Examples include: minimize impervious surfaces; conserve natural areas, including existing trees or other vegetation, and soils; construct sidewalks, walkways, and/or patios with permeable surfaces, etc.

²⁰ List all approved stormwater treatment system(s) to be installed onsite or at a joint stormwater treatment facility (e.g., flow through planter, bioretention facility, infiltration basin, etc.).

²¹ List the legal mechanism(s) (e.g., O&M agreement with private landowner; O&M agreement with homeowners' association; O&M by public entity, etc...) that have been or will be used to assign responsibility for the maintenance of the post-construction stormwater treatment systems.

²² See Provision C.3.d.i. "Numeric Sizing Criteria for Stormwater Treatment Systems" for list of hydraulic sizing design criteria. Enter the corresponding provision number of the appropriate criterion (i.e., 1.a., 1.b., 2.a., 2.b., 2.c., or 3).

²³ For Alternative Compliance at an offsite location in accordance with Provision C.3.e.i.(1), on a separate page, give a discussion of the alternative compliance site including the information specified in Provision C.3.b.v.(1)(m)(i) for the offsite project.

²⁴ For Alternative Compliance by paying in-lieu fees in accordance with Provision C.3.e.i.(2), on a separate page, provide the information specified in Provision C.3.b.v.(1)(m)(ii) for the Regional Project.

²⁵ Note whether a third party was used to certify the project design complies with Provision C.3.d.

²⁶ If HM control is not required, state why not.

²⁷ If HM control is required, state control method used (e.g., method to design and size device(s) or method(s) used to meet the HM Standard, and description of device(s) or method(s) used, such as detention basin(s), bioretention unit(s), regional detention basin, or in-stream control).

C.3.b.v.(1) ► Regulated Projects Reporting Table (part 2) – Projects Approved During the Fiscal Year Reporting Period

Project Name Project No.	Approval Date ²⁸	Date Construction Scheduled to Begin	Source Control Measures ²⁹	Site Design Measures ³⁰	Treatment Systems Approved ³¹	Operation & Maintenance Responsibility Mechanism ³²	Hydraulic Sizing Criteria ³³	Alternative Compliance Measures ^{34/35}	Alternative Certification ³⁶	HM Controls ^{37/38}
Public Projects										
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Comments: N/A-The City did not have any regulated projects in this reporting period										

²⁸ For public projects, enter the plans and specifications approval date.

²⁹ List source control measures approved for the project. Examples include: properly designed trash storage areas; storm drain stenciling or signage; efficient landscape irrigation systems; etc.

³⁰ List site design measures approved for the project. Examples include: minimize impervious surfaces; conserve natural areas, including existing trees or other vegetation, and soils; construct sidewalks, walkways, and/or patios with permeable surfaces, etc.

³¹ List all approved stormwater treatment system(s) to be installed onsite or at a joint stormwater treatment facility (e.g., flow through planter, bioretention facility, infiltration basin, etc.).

³² List the legal mechanism(s) (e.g., O&M agreement with private landowner; O&M agreement with homeowners' association; O&M by public entity, etc...) that have been or will be used to assign responsibility for the maintenance of the post-construction stormwater treatment systems.

³³ See Provision C.3.d.i. "Numeric Sizing Criteria for Stormwater Treatment Systems" for list of hydraulic sizing design criteria. Enter the corresponding provision number of the appropriate criterion (i.e., 1.a., 1.b., 2.a., 2.b., 2.c., or 3).

³⁴ For Alternative Compliance at an offsite location in accordance with Provision C.3.e.i.(1), on a separate page, give a discussion of the alternative compliance site including the information specified in Provision C.3.b.v.(1)(m)(i) for the offsite project.

³⁵ For Alternative Compliance by paying in-lieu fees in accordance with Provision C.3.e.i.(2), on a separate page, provide the information specified in Provision C.3.b.v.(1)(m)(ii) for the Regional Project.

³⁶ Note whether a third party was used to certify the project design complies with Provision C.3.d.

³⁷ If HM control is not required, state why not.

³⁸ If HM control is required, state control method used (e.g., method to design and size device(s) or method(s) used to meet the HM Standard, and description of device(s) or method(s) used, such as detention basin(s), bioretention unit(s), regional detention basin, or in-stream control).

C.3.h.iv. ► Installed Stormwater Treatment Systems Operation and Maintenance Verification Inspection Program Reporting

Fill in table below or attach your own table including the same information.

Name of Facility/Site Inspected	Address of Facility/Site Inspected	Newly Installed? (YES/NO) ³⁹	Party Responsible ⁴⁰ For Maintenance	Date of Inspection	Type of Inspection ⁴¹	Type of Treatment/HM Control(s) Inspected. ⁴²	Inspection Findings or Results. ⁴³	Enforcement Action Taken ⁴⁴	Comments/Follow-up
Nikon Precision Inc.	1399 Shoreway Rd. Belmont, CA 94002	No	Property Owner	1/12/12	Annual	Median landscaping	Acceptable	None needed	
Notre Dame de Namur University	1500 Ralston Ave. Belmont, CA 94002	No	Property Owner	12/22/11	Annual	Detention Pond	Acceptable	None needed	
Summer Hill Cambridge, LLC	2440 Carlmont Dr. Belmont, CA 94002	No	Property Owner	12/22/11	Annual	Two bio-swales	Acceptable	None needed	

³⁹ Indicate "YES" if the facility was installed within the reporting period, or "NO" if installed during a previous fiscal year.

⁴⁰ State the responsible operator for installed stormwater treatment systems and HM controls.

⁴¹ State the type of inspection (e.g., 45-day, routine or scheduled, follow-up, etc.).

⁴² State the type(s) of treatment systems inspected (e.g., bioretention facility, flow-through planter, infiltration basin, etc...) and the type(s) of HM controls inspected, and indicate whether the treatment system is an onsite, joint, or offsite system.

⁴³ State the inspection findings or results (e.g., proper installation, improper installation, proper O&M, immediate maintenance needed, etc.).

⁴⁴ State the enforcement action(s) taken, if any, as appropriate and consistent with your municipality's Enforcement Response Plan.

C.3.e.vi.Special Projects Reporting Table

Reporting Period – December 1, 2011 – June 30, 2012

Project Name & No.	Permittee	Address	Application Submittal Date ⁴⁵	Status ⁴⁶	Description ⁴⁷	Site Total Acreage	Density DU/Acre	Density FAR	Special Project Category ⁴⁸	LID Treatment Reduction Credit Available ⁴⁹	List of LID Stormwater Treatment Systems ⁵⁰	List of Non-LID Stormwater Treatment Systems ⁵¹
N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Comments: N/A-The City did not have any regulated projects in this reporting period												

⁴⁵ Date that a planning application for the Special Project was submitted. If a planning application has not been submitted, include a projected application date.

⁴⁶ Indicate whether final discretionary approval is still pending or has been granted, and provide the date or version of the project plans upon which reporting is based.

⁴⁷ Type of project (commercial, mixed-use, residential), number of floors, number of units, type of parking, and other relevant information.

⁴⁸ For each applicable Special Project Category, list the specific criteria applied to determine applicability. For each non-applicable Special Project Category, indicate n/a.

⁴⁹ For each applicable Special Project Category, state the maximum total LID Treatment Reduction Credit available. For Category C Special Projects also list the individual Location, Density, and Minimized Surface Parking Credits available.

⁵⁰ List all LID stormwater treatment systems proposed. For each type, indicate the percentage of the total amount of runoff identified in Provision C.3.d. for the Special Project's drainage area.

⁵¹ List all non-LID stormwater treatment systems proposed. For each type of non-LID treatment system, indicate: (1) the percentage of the total amount of runoff identified in Provision C.3.d. for the Special Project's drainage area, and (2) whether the treatment system either meets minimum design criteria published by a government agency or received certification issued by a government agency, and reference the applicable criteria or certification.

Section 4 – Provision C.4 Industrial and Commercial Site Controls

Program Highlights
Provide background information, highlights, trends, etc.
<ul style="list-style-type: none"> • Conducted review and evaluation of the existing Business Inspection Plan including facilities list in close collaboration with County Environmental Health. Inspection frequencies are currently 1 inspection every 2 to 3 years depending on facility. Problem or high priority locations could be inspected once every 6 month. • Inspection are scheduled from the facility list however calls from the public or other city departments along with witnessing issues during drive-by's, will cause reason for nonscheduled inspections. • Currently there is only one staff member that conducts site inspections and attends all training classes when held. Interdepartmental meetings are held to inform other city employees as to what to look out for and how to report it. • Participated in the Countywide Program's CII Subcommittee . • Reviewed and provided comments on CII leaflets, flyers and handouts. • Participated in Municipal Maintenance Committee.

C.4.b.i. ► Business Inspection Plan
Do you have a Business Inspection Plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If No, explain: See attached C.4.b.i Business Inspection Plan

C.4.b.iii.(1) ► Potential Facilities List
List below or attach your list of industrial and commercial facilities in your Inspection Plan to inspect that could reasonably be considered to cause or contribute to pollution of stormwater runoff.
See attached Business Inspection Plan for County and Business Inspection Plan for City See attached C.4.b.iii (1) Business Inspection Plan

C.4.b.iii.(2) ► Facilities Scheduled for Inspection
List below or attach your list of facilities scheduled for inspection during the current fiscal year.
See attached Facilities Scheduled for inspection by County and Facilities Scheduled for inspection by City See attached C.4.b.iii (2) Business Inspection Plan

C.4.c.iii.(1) ► Facility Inspections			
Fill out the following table or attach a summary of the following information. Indicate your violation reporting methodology below.			
<input checked="" type="checkbox"/>	Permittee reports multiple discrete violations on a site as one violation.		
<input type="checkbox"/>	Permittee reports the total number of discrete violations on each site.		
SAN MATEO COUNTY VIOLATION REPORTING		Number	Percent
Number of businesses inspected		79	
Total number of inspections conducted		92	
Number of violations (excluding verbal warnings)		1	
Sites inspected in violation		1	1%
Violations resolved within 10 working days or otherwise deemed resolved in a longer but still timely manner		1	100%
CITY OF BELMONT VIOLATION REPORTING		Number	Percent
Number of businesses inspected		9	
Total number of inspections conducted		10	
Number of violations (excluding verbal warnings)		0	
Sites inspected in violation		0	0%
Violations resolved within 10 working days or otherwise deemed resolved in a longer but still timely manner		0	0%
Comments:			
<p>County Environmental Health (EH); Food and HazMat Inspections conduct routine Stormwater inspections at inventoried sites based on High, Medium or Low Priorities. If a violation or discharge is observed, a description of the violation is noted on the inspection report form. If the violation cannot be cleared at the time of the original inspection, a copy of the inspection report form is given to a Stormwater Technician for follow-up. Follow-up inspections are routinely conducted within 10 days or otherwise deemed resolved in a longer but still timely manner.</p> <p><i>Violations not resolved within a timely manner: All violations were abated within a timely manner.</i></p> <p>The City of Belmont did not have any violations that could not be resolved while the inspector was on site during this reporting period. If there had been a violation that required a written notice, there is a procedure in place for follow-up and making sure the violation is corrected in a timely manner.</p>			
Attached Documents: See attached C.4.c.iii (1) Facility Inspections			

C.4.c.iii.(2) ► Frequency and Types/Categories of Violations Observed

Fill out the following table or attach a summary of the following information.

Type/Category of Violations Observed	Number of Violations
Actual discharge (e.g. active non-stormwater discharge or clear evidence of a recent discharge)	0
Potential discharge and other	1
Comments: San Mateo County noted one violation and is reported here in C.4.c.iii(2). The City of Belmont did not observe any violations for this section.	

C.4.c.iii.(2) ► Frequency and Type of Enforcement Conducted

Fill out the following table or attach a summary of the following information.

	Enforcement Action – SAN MATEO COUNTY (as listed in ERP). ⁴⁶	Number of Enforcement Actions Taken	% of Enforcement Actions Taken ⁴⁷
Level 1	Verbal Warning	12	92%
Level 2	Warning Notice or Admin Action	1	8%
Level 3	Admin, Action with Penalty and/or Cost Recovery	0	0
Level 4	Legal Action	0	0
Total		13	100%
	Enforcement Action – CITY OF BELMONT (as listed in ERP). ⁴⁸	Number of Enforcement Actions Taken	% of Enforcement Actions Taken ⁴⁹
Level 1	Verbal Warning	2	100%
Level 2	Notice of Violation	0	0%
Level 3	Stop Work Order	0	0%
Level 4	Administrative Citation	0	0%
Total		2	100%

⁴⁶ Agencies to list specific enforcement actions as defined in their ERPs.

⁴⁷ Percentage calculated as number of each type of enforcement action divided by the total number of enforcement actions.

⁴⁸ Agencies to list specific enforcement actions as defined in their ERPs.

⁴⁹ Percentage calculated as number of each type of enforcement action divided by the total number of enforcement actions.

C.4.c.iii.(3) ► Types of Violations Noted by Business Category

Fill out the following table or attach a summary of the following information.

Business Category ⁵⁰	Number of Actual Discharge Violations	Number of Potential/Other Discharge Violations
Food Facilities (From San Mateo County Report)	0	0
Hazardous Material/Hazardous Waste (From San Mateo County Report)	0	1
Total	0	1

C.4.c.iii.(4) ► Non-Filers

List below or attach a list of the facilities required to have coverage under the Industrial General Permit but have not filed for coverage:

There were no industries identified as non-filers during scheduled inspections during this fiscal year.

C.4.d.iii ► Staff Training Summary

Training Name	Training Dates	Topics Covered	No. of Inspectors in Attendance	Percent of Inspectors in Attendance
SMCWPPP CII Stormwater Inspector Training South San Francisco Corporation Yard	April 25, 2012	County Environmental Health Business Inspection Work Flow, Regulatory Review, Retail Food Programs, Commercial Programs, PCBs, Residential Illicit Discharge	1	100%

⁵⁰ List your Program's standard business categories.

Section 5 – Provision C.5 Illicit Discharge Detection and Elimination

Program Highlights

Provide background information, highlights, trends, etc.

- The City established and is implementing collection system screening program
- The City participated in the Program’s Commercial and Industrial Illicit Discharge Committee including roundtable discussions on the stormwater regulatory review, tips for inspecting for trash, and mobile auto wash best management practices.
- City staff actively participated in the BASMAA Municipal Maintenance Committee and contributed to county activities related to the implementation of the Illicit Discharge Detection and Elimination.
- The City’s Department of Public Works responds to complaints regarding illegal discharges or threats of discharge to the storm sewer system. In order to make it easier to file a complaint, the City accepts illegal stormwater discharge complaints via the email pworks@belmont.gov or phone line. Complaints received are entered into the database and responded to by inspectors and Public Works Operations staff to ensure that consequences of the illicit discharge are mitigated immediately.
- The City continues to analyze its ordinances to ensure efficient and effective language to achieve stormwater pollution control compliance and enforcement.
- Hard copy maps of the City’s MS4 are available to the public at City Hall, and may be viewed during normal business hours. Electronic copies of the maps are also available.
- The City places great value in providing needed training for its inspectors. Every opportunity is taken to participate in the countywide or interdepartmental training.

C.5.c.iii ► Complaint and Spill Response Phone Number and Spill Contact List

List below or attach your complaint and spill response phone number and spill contact list.

Contact	Description	Phone Number
Bozhena Palatnik	Primary Contact	(650) 595-7463

C.5.d.iii ► Evaluation of Mobile Business Program

Describe implementation of minimum standards and BMPs for mobile businesses and your enforcement strategy. This may include participation in the BASMAA Mobile Surface Cleaners regional program or local activities.

Description:

The City uses the same procedures to respond to complaints and illicit discharges for all businesses including mobile businesses operating with the City. The City’s enforcement response plan is followed when any violations are noted. Mobile business licenses are issued through the County and County Environmental Health has initiated educational outreach to mobile food facilities. Please see C.5 Illicit Discharge Detection and Elimination section of the countywide programs FY 11-12 Annual Report.

Currently the city does not hire any Mobile Surface Cleaners, all surface cleaning of city responsible areas is performed by either employees with BASMAA training or other SWPPP training. The city performs outreach and education to businesses that hire Mobile Surface Cleaners informing them that, as the customers of mobile cleaners, they are also liable for any discharges produced.

C.5.e.iii ► Evaluation of Collection System Screening Program

Provide a summary or attach a summary of your collection screening program, a summary of problems found during collection system screening and any changes to the screening program this FY.

Description:
 Collection system screening efforts included both regular maintenance activities and an annual survey of four strategic collection system checkpoints completed in September 2011. Belmont’s regular maintenance activities include weekly inspections of our two storm pump stations, CCTV inspections of storm lines and inspection of catch basins and drain inlets. Belmont maintenance staff also walked the creeks and checked creek mouths for debris and evidence of illicit discharges. No signs of illicit discharges were found during these screening activities.
 Attached: C.5.e.iii Collection System Screening Documents

C.5.f.iii.(1), (2), (3) ► Spill and Discharge Complaint Tracking

Spill and Discharge Complaint Tracking (fill out the following table or include an attachment of the following information)

	Number	Percentage
Discharges reported (C.5.f.iii.(1))	22	
Discharges reaching storm drains and/or receiving waters (C.5.f.iii.(2))	13	59%
Discharges resolved in a timely manner (C.5.f.iii.(3))	22	100%

Comments:
 Attached: C.5.f.iii(1)(2)(3) Spill and Discharge Complaint and Response Program

C.5.f.iii.(4) ► Summary of major types of discharges and complaints

Provide a narrative or attach a table and/or graph.

Attached: C.5.f.iii (4) Graph and Illicit Discharge Reports

Section 6 – Provision C.6 Construction Site Controls

C.6.e.iii.1.a, b, c ▶ Site/Inspection Totals		
Number of sites disturbing < 1 acre of soil requiring storm water runoff quality inspection (i.e. High Priority) (C.6.e.iii.1.a)	Number of sites disturbing ≥ 1 acre of soil (C.6.e.iii.1.b)	Total number of storm water runoff quality inspections conducted (C.6.e.iii.1.c)
# 3	# 4	# 47
<p>Comments:</p> <p>Belmont has a total area of 4 square miles with a population of 26,000. More than 95% of the area is residential. There are some industrial and commercial properties along Ralston Avenue, El Camino Real, Old County Road and Alameda de las Pulgas. Majority of the residential properties are less than 10,000 SF. Some of the lots are on hillside.</p> <p><u>Sites disturbing less than 1 acre of soil requiring storm water runoff quality inspections</u> Three sites are considered priority as they near the creek : 3405 Bartlett, 3900 Masrten, 1114 Ladrea. The owners are required to obtain creek permits from the Fish and Game, Army Corp and Regional Water Board.</p> <p><u>Sites disturbing more than 1 acre of soil :</u> -A City bike bridge project that disturbed more than 1 acre. NOI was filed with project classified as Risk 1. Weekly inspection, non-storm water discharge, SWPPP etc. were performed. An annual report was filed on 8/31/12. -Three school projects that disturb more than 1 acre at Ralston Middle School, Nesbit Elementary School and Fox Elementary School. General Construction Permits were obtained from the Board by the School District. These projects are level 1. These projects began in April 2012 and 3 inspection were done at each site in this reporting period.</p> <p><u>Other sites inspected</u> City projects included sliplining storm/sewer pipes and roadway paving projects less than 1 acre. Stormwater inspections were carried out throughout the project for storm water protection. The City also inspected <u>all sites</u> less than 1 acre as part of the MRP inspection programs. Staff keeps a list of all permits that require grading or disturbance of soil. There are total 26 projects that fall into this category.</p>		

C.6.e.iii.1.d ▶ Construction Activities Storm Water Violations		
BMP Category	Number of Violations ⁵¹	% of Total Violations ⁵²
Erosion Control	7	27
Run-on and Run-off Control	0	0
Sediment Control	9	35
Active Treatment Systems	0	0
Good Site Management	9	35
Non Stormwater Management	1	3
Total	26	100%

C.6.e.iii.1.e ▶ Construction Related Storm Water Enforcement Actions			
	Enforcement Action (as listed in ERP) ⁵³	Number Enforcement Actions Taken	% Enforcement Actions Taken ⁵⁴
Level 1	Verbal Warning	9	82%
Level 2	Notice of Violation	0	0
Level 3	Stop Work Order	2	18
Level 4	Administrative Citation	0	0
Total		11	100%

There were sites with multiple violations that resulted in 1 enforcement action.

⁵¹ Count one violation in a category for each site and inspection regardless of how many violations/problems occurred in the BMP category.

⁵² Percentage calculated as number of violations in each category divided by total number of violations in all six categories.

⁵³ Agencies should list the specific enforcement actions as defined in their ERPs.

⁵⁴ Percentage calculated as number of each type of enforcement action divided by the total number of enforcement actions.

C.6.e.iii.1.f, g ► Illicit Discharges	
	Number
Number of illicit discharges, actual and those inferred through evidence (C.6.e.iii.1.f)	0
Number of sites with discharges, actual and those inferred through evidence (C.6.e.iii.1.g)	0

C.6.e.iii.1.h, i ► Violation Correction Times		
	Number	Percent
Violations fully corrected within 10 business days after violations are discovered or otherwise considered corrected in a timely period (C.6.e.iii.1.h)	5	100% ⁵⁵
Violations not fully corrected within 30 days after violations are discovered (C.6.e.iii.1.i)	0	0% ⁵⁶
Total number of violations for the reporting year ⁵⁷	5	100%

C.6.e.iii.(2) ► Evaluation of Inspection Data	
Describe your evaluation of the tracking data and data summaries and provide information on the evaluation results (e.g., data trends, typical BMP performance issues, comparisons to previous years, etc.).	
<p>Description:</p> <p>The majority of the problems encountered were the result of inadequate site management and problems with sediment and erosion control. A specific problem noted in a number of inspection reports was the need to cover stockpiles.</p> <p>Each City's Capital Improvement Project has an assigned inspector. The inspector performs routine inspection for MRP compliance throughout the length of the construction. Specifications and conditions are included in each project contract for BMP compliance.</p>	

⁵⁵ Calculated as number of violations fully corrected in a timely period after the violations are discovered divided by the total number of violations for the reporting year.

⁵⁶ Calculated as number of violations not fully corrected within 30 days after the violations are discovered divided by the total number of violations for the reporting year.

⁵⁷ Total number of violations equals the number of initial enforcement actions (i.e. one violation issued for several problems during an inspection at a site). It does not equal the total number of enforcement actions because one violation issued at a site may have a second enforcement action for the same violation at the next inspection if it is not corrected.

C.6.e.iii.(2) ► Evaluation of Inspection Program Effectiveness

Describe what appear to be your program’s strengths and weaknesses, and identify needed improvements, including education and outreach.

Description:

Strengths:

Updated stormwater construction inspection forms and inspection data tracking tools:

The current construction inspection form has been modified to help in document tracking which was identified as a needed improvement in last year’s annual report.

CRW Systems, Trackit Solution software has been implemented to track follow-up inspections

Need for improvement:

Better documentation and filing of violation notices.

C.6.f ► Staff Training Summary

Training Name	Training Dates	Topics Covered	No. of Inspectors in Attendance	Percent of Inspectors in Attendance
San Mateo Countywide Water Pollution Prevention Program-Low Impact Development –Implementing new LID requirements	10/06/11	“How to” on Implementing new “LID” requirements. Determining when the LID requirements apply to projects; evaluate feasibility of infiltration or rainwater harvesting; Review project submittals.	4 (of 5)	80%
San Mateo Countywide Water Pollution Prevention Program- New Low Impact Development (LID) Feasibility Worksheets	11/17/2011	Overview of LID feasibility requirements (info covered on 10/06 class-listed above); Overviews of the following worksheets- Final LID feasibility screening; worksheets to be used if screening results show more evaluation is needed; final rainwater harvesting feasibility, final infiltration feasibility; practice with worksheets	1 (of 5)	20%
San Mateo Countywide Water Pollution Prevention Program-Stormwater	02/08/2012	Conducting Construction site inspections under the MRP requirements.	1 (of 5)	20%

Workshop for Construction Site Inspectors				
San Mateo Countywide Water Pollution Prevention Program-Workshop for Commercial and Industrial Inspectors	04/25/2012	CWEA Certification- Conducting inspections for Commercial, Mobile businesses, and Fats, Oils, and Grease (FOG).	1 (of 5)	20%

Section 7 – Provision C.7. Public Information and Outreach

C.7.b.ii.1 ▶ Advertising Campaign

Summarize advertising efforts. Include details such as messages, creative developed, and outreach media used. The detailed advertising report may be included as an attachment. If advertising is being done by participation in a countywide or regional program, refer to the separate countywide or regional Annual Report.

Summary:

The following separate report developed by BASMAA summarizes the activities of the Regional Youth Litter Campaign

- BASMAA Youth Litter Campaign Report

The City took part in advertising for the Regional Youth Litter Campaign by placing posters in City buildings, the City website, and social media outlets such as Facebook, twitter, nextdoor.com, and Patch.

Attached: C.7.b.iii City Advertising Debrief

C.7.b.iii.1 ▶ Pre-Campaign Survey

(For the Annual Report following the precampaign survey) Summarize survey information such as sample size, type of survey (telephone survey, interviews etc.). Attach a survey report that includes the following information. If survey was done regionally, refer to a regional submittal that contains the following information:

The following separate report developed by BASMAA summarizes the pre-campaign survey conducted in FY 11-12:

- BASMAA Youth Litter Campaign Report

Survey report attached

Reference to regional submittal:

C.7.c ▶ Media Relations

Summarize the media relations effort. Include the following details for each media pitch in the space below, AND/OR refer to a regional report that includes these details:

- Topic and content of pitch
- Medium (TV, radio, print, online)
- Date of publication/broadcast

Summary:

The following reports developed by BASMAA summarizes the regional media relations efforts conducted during FY 11-12:

- BASMAA Media Relations Final Report FY 11-12

This report and any other media relations efforts conducted countywide is included within the C.7 Public Information and Outreach section of the Countywide Program's FY 11-12 Annual Report.

C.7.d ► Stormwater Point of Contact

Summary of any changes made during FY 10-11:

The Countywide Program’s point of contact has not changed. A summary of efforts conducted by the countywide program to publicize stormwater points of contact is included within the C.7 Public Information and Outreach section of the Countywide Program’s FY11-12 Annual Report.

C.7.e ► Public Outreach Events

Describe general approach to event selection. Provide a list of outreach materials and giveaways distributed. Use the following table for reporting and evaluating public outreach events

Event Details	Description (messages, audience)	Evaluation of Effectiveness
Provide event name, date, and location. Indicate if event is local, countywide or regional.	Identify type of event (e.g., school fair, farmers market etc.), type of audience (school children, gardeners, homeowners etc.) and outreach messages (e.g., Enviroscene presentation, pesticides, stormwater awareness)	Provide general staff feedback on the event (e.g., success at reaching a broad spectrum of the community, well attended, good opportunity to talk to gardeners etc.). Provide other details such as: <ul style="list-style-type: none"> • Estimated overall attendance at the event. • Number of people that visited the booth, comparison with previous years • Number of brochures and giveaways distributed • Results of any spot surveys conducted
Creek Awareness September 12, 2011 Outreach mailing (City)	Event type: Mailing Audience: homeowners along creek Outreach message: “Maintaining a healthy creek”. Mailing included proper disposal of yard clippings, keeping creek bank along property free of debris, obtaining proper permits before performing construction along creek, using non-toxic pest control methods, reporting illegal dumping, and contacts for volunteer opportunities. A stormwater pollution prevention brochure was inserted with each letter.	No survey was conducted , as this was an outreach mailing. It is unknown if the residents used the information proactively. Attached: C.7.e Public Outreach Events Summary

<p>National Public Works Week May 21-May 25 Hours varied from 8-12 & 1-5 One Twin Pines Lane-Belmont City Hall & 110 Sem Lane- Belmont Corporation Yard (City)</p>	<p>Event type: Public Outreach Event-Open House Audience: Residents of all ages Outreach Message: Enviroscape diorama presentation; battery recycling station, awareness included Stormwater pollution prevention, hazardous household waste, Infiltration and inflow, pesticides, car washing tips, preventing overflows (sewer line cleaning and smoke testing demonstrations, and displays of clogged pipes with root balls and rags.</p>	<p>No formal survey was conducted. Advertising: a banner display over Ralston Avenue, posters in library, various city businesses and city buildings. Social media included Facebook, Twitter, Nextdoor.com, Patch.com, the City's website and local channel 27. Handouts: children's pollution prevention activity booklets, bookmarks, fish sponges, car wash tip cards, You are the Solution to Water Pollution, Hazardous Household Waste, Proper Care Care/Oil change, OWOW materials. A reusable eco-tote bag was given to the first 50 people that signed up for the BASMAA Youth Anti-Littering Campaign "Be The Street" newsletter. The Open-House brought in a total of 117 people visiting various public works displays. Of that total, there were two fourth-grade classrooms (63 students) that came to the stormwater pollution prevention diorama presentation and given children pollution prevention materials. Public Reaction/Comments: Most commented they thought the open-house was a great way to get information. The school children enjoyed the diorama, and the sewer presentation was enjoyed by all who stopped by that station. Attached: C.7.e Public Outreach Events Summary</p>
<p>"You are the Solution to Water Pollution"- Continuous cycling through Channel 27 (Belmont station) (city)</p>	<p>Event type: Local television slide show Audience: All Belmont residents-any age Outreach message: Stormwater Pollution Prevention Presentation- With contact Informational numbers for the following: Recycleworks, Recology, Curbside Inc., Our Water Our World, Proper Car Washing, A clean sweep, Carpool, and Prevent water pollution message.</p>	<p>No formal survey was conducted. Outreach: Presentation continually cycling on local Belmont television channel 27, Handouts: Brochures and handouts available in Belmont City Hall lobby and the Public Works Department. Attached: C.7.e Public Outreach Events Summary</p>

<p>The following outreach events were done on a county-wide level by SMCWPPP and are included in the C.7 Public Information and Outreach section of Programs FY 11-12 Annual Report</p>		
<p>2012 San Mateo County Fair June 09 through June 17 11am-10pm San Mateo County Fair Grounds in San Mateo (Countywide)</p>	<p>Event type: County Fair-Sustainable Living section Audience: All ages, San Mateo County and beyond Outreach message: Stormwater Pollution prevention, hazardous household waste, oil, lead, OWOW, etc.</p>	<p>Total event attendance is unknown. Approximately 2,000 minimum attended the booth. Advertising: Belmont displayed posters in local businesses, throughout city buildings, Belmont website, Belmont Public Works Website, and local channel 27. Belmont Public Information and Participation Committee(PIP) member staffed the booth on Saturday, June 09 from 10-1 and Thursday, June 14 from 5-7. Handouts included: car wash discount cards, information on oil recycling, toxics disposal, less toxic gardening and children’s activity booklets. Public Reaction/Comments: People were very interested in all the programs that were presented. 81 people signed up for the “Be The Street” E-newsletter. People appreciated the handouts. A comment box was set up to solicit questions from people when the booth was unstaffed. Attached: C.7.e Public Outreach Events Summary</p>
<p>Coordination of California Coastal Cleanup Day in San Mateo County September 17-2011 9am-12 noon (City and Countywide Event)</p>	<p>Event type: Cleanup of waterways. Various locations throughout the County, the City of Belmont participated in this event. Audience: Residents of all ages Outreach message: Stormwater Pollution prevention, anti-littering</p>	<p>Total Participants for Belmont: There were 78 participants, 4 miles cleaned, 587 pounds of garbage and 213 pounds of recyclables collected. Approximately 25 people brought their own bucket and gloves. There was a raffle for a SoilSaver Compost Bin at the end of the cleanup event, along with reusable totes as additional giveaways. Handouts included: A booth was setup with informational material on pollution prevention, less-toxic pest controls (OWOW materials), hazardous household waste, car wash tip cards</p>

		<p>and children’s activity booklets.</p> <p>Advertising: A banner was displayed over Ralston Avenue, advertisement posting on the Ralston signboard, posters were displayed in Library, various city businesses and city buildings. Advertisement placed in the Belmont Parks and Recreation Guide, Local press release and local channel 27. Social media included Belmont Public Works Facebook page, twitter, nextdoor.com, patch.com, flowstobay website, and Belmont website</p> <p>Public Reaction/Comments: People really enjoyed cleaning up and look forward to more cleanups and especially liked having a raffle.</p> <p>Attached: C.7.e Public Outreach Events Summary</p>
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C.7.f. ► Watershed Stewardship Collaborative Efforts

Summarize watershed stewardship collaborative efforts and/or refer to a regional report that provides details. Describe the level of effort and support given (e.g., funding only, active participation etc.). State efforts undertaken and the results of these efforts. If this activity is done regionally refer to a regional report.

Evaluate effectiveness by describing the following:

- Efforts undertaken
- Major accomplishments

Summary:
A summary of efforts conducted by the countywide program to work with watershed stewardship groups is included within the C.7 Public Information and Outreach section of the Countywide Program’s FY11-12 Annual Report.

C.7.g. ► Citizen Involvement Events		
List the types of events conducted (e.g., creek clean up, storm drain inlet marking, native gardening etc.). Use the following table for reporting and evaluating citizen involvement events.		
Event Details	Description	Evaluation of effectiveness
Provide event name, date, and location. Indicate if event is local, countywide or regional	Describe activity (e.g., creek clean-up, storm drain marking etc.)	Provide general staff feedback on the event. Provide other evaluation details such as: <ul style="list-style-type: none"> • Number of participants. Any change in participation from previous years. • Distance of creek or water body cleaned • Quantity of trash/recyclables collected (weight or volume). • Number of inlets marked. • Data trends
<p>Earthweek On-Land Trash Cleanup April 21, 2012 9am-noon One Twin Pines Lane- Belmont City Hall (City)</p>	<p>Event type: City-wide community on-land trash cleanup, recycling drop-off and outreach. The on-land cleanup was in various locations throughout the city and included parks, schools, O’Neill Slough walking path, Water Dog Lake trail, and the perimeter of Carlmont Shopping Center by the creek.</p> <p>Audience: Residents of all ages</p> <p>Outreach message: Stormwater Pollution prevention, recycling, E-waste, composting, document shredding</p>	<p>Total Participants: This was the City’s first Earth Day “On-land cleanup event”. There were 28 volunteers that came out in the hot weather, collecting 375 pounds of garbage and recyclables. Of all the garbage picked up, the most collected item was the plastic bag, totaling an overwhelming 100 bags. Other events took place in conjunction with the cleanup, as city hall hosted E-waste drop off, composting, and document shredding. There was a stormwater pollution prevention booth where people could gather information.</p> <p>Handouts included: pollution prevention, less-toxic pest controls (OWOW materials), hazardous household waste, car wash tip cards and children’s activity booklets.</p> <p>Advertising: posters were displayed in Library, various city businesses and city buildings. Social media included Belmont Public Works Facebook page, twitter, nextdoor.com, patch.com, flowstobay website, CA Coastal Commission website and local channel 27.</p>

		<p>Public Reaction/Comments: People really liked having an earthday event where they could drop off their E-waste, shred documents, clean up the community, and grab some compost. The car wash discount cards and children’s activity books were a huge hit.</p> <p>Attached: C.7.g Citizen involvement events summary</p>
<p>California Coastal Cleanup Day 2011 September 17, 2011 9am-noon One Twin Pines Lane- Belmont City Hall (City and Countywide event)</p>	<p>Event type: Creek cleanup- Various locations throughout the city. Water Dog Lake, Belmont Creek, O’Neill Slough (north and south)</p> <p>Audience: Residents of all ages</p> <p>Outreach message: Creek cleanup, Stormwater Pollution prevention</p>	<p>Total Participants: There were 78 participants, 4 miles cleaned, 587 pounds of garbage and 213 pounds of recyclables collected. Approximately 25 people brought their own bucket and gloves. There was a raffle for a SoilSaver Compost Bin at the end of the cleanup event, along with reusable totes as additional giveaways.</p> <p>Handouts included: Informational material on pollution prevention, less-toxic pest controls (OWOW materials), hazardous household waste, car wash tip cards and children’s activity booklets.</p> <p>Advertising: A banner was displayed over Ralston Avenue, advertisement posting on the Ralston signboard, posters were displayed in Library, various city businesses and city buildings. Advertisement placed in the Belmont Parks and Recreation Guide, Local press release and local channel 27. Social media included Belmont Public Works Facebook page, twitter, nextdoor.com, patch.com, flowstobay website, and Belmont website</p> <p>Public Reaction/Comments: People enjoyed cleaning up and look forward to more cleanups and especially liked having a raffle.</p> <p>Attached: C.7.g Citizen involvement events summary</p>

The following citizen involvement events were done on a countywide level by SMCWPPP and are included in the C.7 Public Information and Outreach section of the Countywide Program's FY 11-12 Annual Report.		
Event Details	Description	Evaluation of effectiveness
<p>The following citizen involvement event was done on a countywide level by SMCWPPP and included in the C.7 Public Information and Outreach section of Countywide Program's FY 11-12 Annual Report:</p> <ul style="list-style-type: none"> • Administration of a Community Action Grant program" 	SMCWPPP offers \$15,000 in Community Action Grants for volunteer groups, teachers, environmental organizations and other local, not-for-profit associations interested in developing and/or implementing projects that improve the quality of local creeks, the Bay or the Pacific Ocean within San Mateo County. Up to \$3,000 is awarded to groups proposing projects to restore, protect, enhance, or prevent pollution of local waterways or which benefit the ecology of the San Mateo County watershed.	

C.7.h. ► School-Age Children Outreach

Summarize school-age children outreach programs implemented. A detailed report may be included as an attachment. Use the following table for reporting school-age children outreach efforts.			
Program Details	Focus & Short Description	Number of Students/Teachers reached	Evaluation of Effectiveness
Provide the following information: Name Grade or level (elementary/ middle/ high)	Brief description, messages, methods of outreach used	Provide number or participants	Provide agency staff feedback. Report any other evaluation methods used (quiz, teacher feedback etc.). Attach evaluation summary if applicable.
SMCWPPP conducted the school-age children outreach program countywide. A summary of efforts conducted by the countywide program for school-aged children outreach is included within the C.7 Public Information and Outreach section of the Countywide Program's FY 11-12 Annual Report. Serendipity School-(listed below) was part of the countywide outreach program.			

<p>Serendipity School Grade School October 12, 2011 1:15pm 2820 Ponce Ave Belmont, CA 94002 (Countywide program)</p>	<p>The Banana Slugs duo presents a musical adventure about storm drains, recycling, and keeping water clean. They use a combination of music, theatre and puppetry and audience participation. Shows are 45 minutes long and meet State Content Standards.</p>	<p>116 students</p>	<p>Provided in the Countywide Programs FY 11-12 Annual Report</p>
<p>Immaculate Heart of Mary-IHM (Belmont) and sister school St. Pius (Redwood City) Grade School 1:30pm One Twin Pines Lane-Belmont City Hall Belmont, CA 94002</p>	<p>Watershed Diorama Presentation, Water Pollution Prevention Awareness.</p> <p>Attached: C.7.h 4th Grade School Outreach Summary</p>	<p>63 children</p>	<p>The City of Belmont presented a school age outreach presentation on "Where Does the Water Flow?" diorama presentation was held during National Public Works Week. Schools were emailed a flyer of event. Two 4th grade classes from two schools attended. IHM in Belmont and their sister school St. Pius in Redwood City. Some of the questions we asked the students were: "Where does the rain go?", "What types of things can be carried downstream from water runoff?" "How many of the kids walk along the bay and saw trash floating?" "How can you help from things going into the bay/ocean?". Students were very interactive and really enjoyed the presentation. Most children understood the concept and thought the diorama was "cool". Outreach materials given out to the students included water pollution prevention activity booklets, bookmarks, fish sponges and soy crayons.</p>

Section 8 - Provision C.8 Water Quality Monitoring

C.8 ► Water Quality Monitoring

State below if information is reported in a separate regional report. Municipalities can also describe below any Water Quality Monitoring activities in which they participate directly, e.g. participation in RMP workgroups, fieldwork within their jurisdictions, etc.

Summary

During FY 11-12, we contributed through the countywide Program to the BASMAA Regional Monitoring Coalition (RMC). In addition, we contributed financially to the Regional Monitoring Program for Water Quality in the San Francisco Estuary (RMP) and were represented at RMP committees and work groups. For additional information on monitoring activities conducted by the Program, BASMAA RMC and the RMP, see the C.8 Water Quality Monitoring section of the Program's FY 11-12 Annual Report.

Section 9 – Provision C.9 Pesticides Toxicity Controls

C.9.b ► Implement IPM Policy or Ordinance					
Report implementation of IPM BMPs by showing trends in quantities and types of pesticides used, and suggest reasons for increases in use of pesticides that threaten water quality, specifically organophosphates, pyrethroids, carbaryl, and fipronil. A separate report can be attached as evidence of your implementation.					
Trends in Quantities and Types of Pesticides Used ⁵⁸					
Pesticide Category and Specific Pesticide Used	Amount ⁵⁹				
	FY 09-10	FY 10-11	FY 11-12	FY 12-13	FY 13-14
Organophosphates	0	0	0		
Product or Pesticide Type A	0	0	0		
Product or Pesticide Type B	0	0	0		
Pyrethroids	0	0	0		
Product or Pesticide Type X	0	0	0		
Product or Pesticide Type Y	0	0	0		
Carbaryl	0	0	0		
Fipronil	0	0	0		

C.9.c ► Train Municipal Employees	
Enter the number of employees that applied or used pesticides (including herbicides) within the scope of their duties this reporting year.	8
Enter the number of these employees who received training on your IPM policy and IPM standard operating procedures within the last 3 years.	8
Enter the percentage of municipal employees who apply pesticides who have received training in the IPM policy and IPM standard operating procedures within the last three years.	100

⁵⁸ Includes all municipal structural and landscape pesticide usage by employees and contractors.

⁵⁹ Weight or volume of the product or preferably its active ingredient, using same units for the product each year.

C.9.d ▶ Require Contractors to Implement IPM			
Did your municipality contract with any pesticide service provider in the reporting year?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, attach one of the following:			
<input type="checkbox"/>	Contract specifications that require adherence to your IPM policy and standard operating procedures, OR		
<input checked="" type="checkbox"/>	Copy(ies) of the contractors' IPM certification(s) or equivalent, OR		
<input checked="" type="checkbox"/>	Equivalent documentation.		
<p>If Not attached, explain:</p> <p>The City of Belmont adopted, by City Council Resolution, an IPM Policy in 2010. Subsequently, the City of Belmont no longer has a Restricted Materials Permit as it had in prior years (permits for 2009-2012 attached). Our IPM Policy requires city staff to evaluate each use of pesticides using the criteria of alternative methods to control pests. As a result, we no longer use restricted materials in maintaining city properties.</p> <p>The city contracts with Clark Pest Control to control gophers on Belmont/Redwood Shores School District properties. All applications are below surface and pose no risk to water quality. Clark pest Control is required to review and acknowledge the City's IPM Policy prior to renewing their business license each year. This suffices the requirement of outreach and implementation of an IPM Policy. Clark pest Control also has training records of their employees on IPM's, Green Pro Certification, Product Labels, and Continued Education etc...</p> <p>Attached: C.9.d Permits for 2009-2012, Green Pro Certification, IPM Policy, IPM Certificate</p>			

C.9.e ▶ Track and Participate in Relevant Regulatory Processes
Summarize participation efforts, information submitted, and how regulatory actions were affected OR reference a regional report that summarizes regional participation efforts, information submitted, and how regulatory actions were affected.
<p>Summary:</p> <p>During FY 11-12, we participated in regulatory processes related to pesticides through contributions to the countywide Program, BASMAA and CASQA. For additional information, see the Regional Pollutants of Concern Report submitted by BASMAA on behalf of all MRP Permittees.</p> <p>Additionally, all city staff with Qualified Applicators Certificates received the required Continuing Education course work.</p>

C.9.f ▶ Interface with County Agricultural Commissioners			
Did your municipal staff observe any improper pesticide usage or evidence of improper usage (e.g., pesticides in storm drain systems, along street curbs, or in receiving waters) during this fiscal year?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/> No

None observed or reported.

C.9.h.ii ▶ Public Outreach: Point of Purchase
Provide a summary of public outreach at point of purchase, and any measurable awareness and behavior changes resulting from outreach (here or in a separate report); OR reference a report of a regional effort for public outreach in which your agency participates.
Summary: See the C.9 Pesticides Toxicity Control section of Program's FY 11-12 Annual Report for information on point of purchase public outreach conducted countywide and regionally.

C.9.h.vi ▶ Public Outreach: Pest Control Operators
Provide a summary of public outreach to pest control operators and landscapers and reduced pesticide use (here or in a separate report); OR reference a report of a regional effort for outreach to pest control operators and landscapers in which your agency participates.
Summary: See the C.9 Pesticides Toxicity Control section of Program's FY 11-12 Annual Report for a summary of our participation in and contributions towards countywide and regional public outreach to pest control operators and landscapers to reduce pesticide use.

Response to Water Board Staff Comments on Section 9, Provision C.9, of FY 10-11 Annual Report
The City of Belmont does not have a Restricted Materials Permit issued by the County Department of Agriculture. The City's IPM Policy resulted in no longer using restricted Chemicals. The Permit was issued in January 2012.

C.1. Section 10 - Provision C.10 Trash Load Reduction

C.10.a.i ▶ Short-Term Trash Loading Reduction Plan

(For FY 10-11 Annual Report only) Provide description of actions/tasks initiated/conducted/completed in developing a Short-Term Trash Loading Reduction Plan (due February 1, 2012).

Description:

The Short –Term Trash Loading Reduction Plan was submitted to the Water Board on February 1, 2012. See the C.10 Trash Load Reduction section of Program’s FY 11-12 Annual Report for information on countywide and regional activities conducted on behalf of co-permittees.

C.10.a.ii ▶ Baseline Trash Load and Trash Load Reduction Tracking Method

(For FY 10-11 Annual Report only) Provide description of actions/tasks initiated/conducted/completed to gather trash loading data and in developing a Baseline Trash Load and Trash Load Reduction Tracking Method (due February 1, 2012).

Description:

The Baseline Trash Load and Trash Load Reduction Tracking Method was submitted to the Water Board on February 1, 2012. See the C.10 Trash Load Reduction section of Program’s FY 11-12 Annual Report for information on countywide and regional activities conducted on behalf of co-permittees.

C.10.a.iii ▶ Minimum Full Trash Capture

(For FY 10-11 Annual Report and Each Annual Report Thereafter) Provide description of actions/tasks initiated/conducted/completed in implementing Minimum Full Trash Capture Devices (due July 1, 2014) within individual jurisdictions. Include information on Full Trash Capture Devices installed under the Bay-area Wide Trash Capture Demonstration Project administered by San Francisco Estuary Partnership and an estimate of the total land area that is planned for treatment by July 1, 2014.

Description:

See the C.10 Trash Load Reduction section of Program’s FY 11-12 Annual Report for information on countywide and regional activities conducted on behalf of co-permittees.

During FY 11-12, the City of Belmont installed 32 full-trash capture devices with funding provided through the San Francisco Bay-area Wide Trash Capture Demonstration Project administered by San Francisco Estuary Partnership (SFEP). These full-capture trash devices exceed the minimum trash catchment area (in acres) for the City of Belmont. Attached: C.10.a.iii Press release and photo of plaque

C.10.b.iii ► Trash Hot Spot Assessment

(For FY 10-11 Annual Report and Each Annual Report Thereafter) Provide volume of material removed from each Trash Hot Spot cleanup, and the dominant types of trash (e.g., glass, plastics, paper) removed and their sources to the extent possible.

Fill out the following table or attach a summary of the following information.

Trash Hot Spot	Cleanup Date	Volume of Material Removed	Dominant Type of Trash	Trash Sources (where possible)
Belmont Creek (Work Furlough)	April 2012	100 gallons	Plastic bags, other plastic products, bottles (plastic/glass), convenience-fast food items, paper and cardboard	Shoreline accumulations from other sources, littering, illegal dumping
O’Neill Slough-southern portion (Work Furlough)	April 2012	70 gallons	Plastic bags, other plastic products, paper and cardboard, bottles (plastic/glass), convenience/fast food items	Shoreline accumulation from other sources, littering
Belmont Creek (CA Coastal Cleanup)	September 2011	200 gallons	Paper and cardboard, other plastic products, plastic bags, bottles (plastic/glass)	Shoreline accumulation from other sources, littering, illegal dumping
O’Neill Slough-southern portion (CA Coastal Cleanup)	September 2011	40 gallons	Other plastic products, paper and cardboard, plastic bags, bottles (plastic/glass), convenience/fast food items	Shoreline accumulation from other sources, littering

Attached: C.10.b.iii Trash Hot Spot Cleanup Data Collection Forms

C.10.d ► Summary of Trash Reduction Actions and Loads Reduced

Provide a summary of trash load reduction actions (i.e., control measures and best management practices) implemented within your jurisdictional boundaries during the reporting period to achieve a 40% trash load reduction goal by July 1, 2014. For those actions implemented in FY 2011-12, include brief descriptions of levels of implementation and the total trash loads and dominant types of trash removed from each action.

New or Enhanced Trash Load Reduction Action	Description of New or Enhanced Action Implemented in FY 11-12	Estimated Trash Load Removed in FY 11-12 (Gallons) ⁶⁰	Estimated Percent Reduction as of FY 11-12 ⁵⁸	Estimated Dominant Types of Trash Removed in FY 11-12
Existing Enhanced Street Sweeping QF-2	The current street sweeping program includes sweeping most streets in residential areas once every two weeks and most retail areas three times per week. In addition, there are two residential neighborhoods that have enhanced leaf sweeping.	283	5	Cardboard and plastic bags
Public Education and Outreach Programs CR-3	<ul style="list-style-type: none"> • The City is participating in in the BASMAA youth outreach campaign for litter reduction. Information has been posted to the City's social media sites, displays the campaign message and e-newsletter signup during City outreach events. • The City sent out creek awareness letters/notices to property owners along Belmont Creek. The letter was geared toward maintaining a healthy creek. Informational brochures on creek awareness/pollution prevention were sent with notices. <p>In addition to City efforts for new or enhance outreach actions, the following were done on a county-wide level:</p> <ul style="list-style-type: none"> • Outreach to School-age Children or Youth-Banana Slug School Assembly Program (Countywide), "Water Pollution Prevention and Your Car" Presentation • Media Relations (Use of Free Media)-Coastal Cleanup Day Promotion • Community Outreach Events -San Mateo County Fair • Spring Cleanup Promotional Program <p>These Public education and outreach programs are documented under C.7 in the City's reporting. Attachments located under C.7</p>	270	4.8	All Trash Types

⁶⁰The estimated load removed and percent reduction in FY 11-12 is consistent with assumptions described in the Trash Load Reduction Tracking Method Technical Report (version 1.0) submitted to the Water Board on February 1, 2012. In the future, load reductions reported in Annual Reports may be adjusted based on revisions to the tracking methodology.

C.10.d ► Summary of Trash Reduction Actions and Loads Reduced

Provide a summary of trash load reduction actions (i.e., control measures and best management practices) implemented within your jurisdictional boundaries during the reporting period to achieve a 40% trash load reduction goal by July 1, 2014. For those actions implemented in FY 2011-12, include brief descriptions of levels of implementation and the total trash loads and dominant types of trash removed from each action.

New or Enhanced Trash Load Reduction Action	Description of New or Enhanced Action Implemented in FY 11-12	Estimated Trash Load Removed in FY 11-12 (Gallons) ⁶⁰	Estimated Percent Reduction as of FY 11-12 ⁵⁸	Estimated Dominant Types of Trash Removed in FY 11-12
Activities to Reduce Trash from Uncovered Loads CR-4	Ongoing enforcement through Recology per Franchise Agreement.	54	1	All Trash Types
Anti-littering and Illegal Dumping Enforcement Activities CR-5	Installation of a new 273' long, 4' tall fence and placement of "No Dumping" signage along Belmont Creek- also noted as one of the city's "hot spots"	54	1	All Trash Types
Full-Capture Treatment Devices QF-5	A total of 32 full-capture trash devices (i.e., Connector Pipe Screens) were installed in FY11-12, bringing the total of full-capture devices installed within the City of Belmont to 35. During FY 11-12, 28 devices were cleaned once and 7 devices were cleaned twice for a total of 42 cleanings.	446	7.8	All Trash Types
Preliminary Estimate of Trash Load Removed (Gallons) in FY 2011-12		1,108		
Preliminary Baseline Trash Load Estimate (Gallons)		5,691		
Total Percentage Reduction in FY 2011-12 (Compared to Baseline Trash Load)		19.5%		

Section 11 - Provision C.11 Mercury Controls

C.11.a.i ► Mercury Recycling Efforts

List below or attach lists of efforts to promote, facilitate, and/or participate in collection and recycling of mercury containing devices and equipment at the consumer level (e.g., thermometers, thermostats, switches, bulbs).

Promotion of Household Hazardous Waste (HHW) :

Refer to the Countywide Program’s Annual Report for information regarding the promotion of collection and recycling of mercury containing devices by the County Hazardous Waste Program.

Collection of Mercury-containing devices and equipment:

A Door-to-Door HHW program (*CurbsideInc*) is currently available to the residents of Belmont through RethinkWaste for the collection of mercury containing devices and other hazardous household waste. A total of 454 appointments were scheduled by Belmont residents between July 1, 2011 and June 30, 2012 for HHW.

C.11.a.ii ► Mercury Collection

Provide an estimate of the mass of mercury collected through these efforts, or provide a reference to a report containing this estimate.

Please refer to the FY 11-12 Countywide Program Annual Report for an estimate of the mass of mercury collected through collection and recycling efforts by the County Hazardous Waste Program.

- C.11.b ▶ Monitor Methylmercury**
- C.11.c ▶ Pilot Projects to Investigate and Abate Mercury Sources in Drainages**
- C.11.d ▶ Pilot Projects to Evaluate and Enhance Municipal Sediment Removal and Management Practices**
- C.11.e ▶ Conduct Pilot Projects to Evaluate On-Site Stormwater Treatment via Retrofit**
- C.11.f ▶ Diversion of Dry Weather and First Flush Flows to POTWs**
- C.11.g ▶ Monitor Stormwater Mercury Pollutant Loads and Loads Reduced**
- C.11.h ▶ Fate and Transport Study of Mercury In Urban Runoff**
- C.11.i ▶ Development of a Risk Reduction Program Implemented Throughout the Region**
- C.11.j ▶ Develop Allocation Sharing Scheme with Caltrans**

State below if information is reported in a separate regional report. Municipalities that participate directly in regional activities to can provide descriptions below.

Summary

A summary of the Countywide Program's and regional accomplishments for these sub-provisions is included within the C.11 Mercury Controls section of the Countywide Program's FY 11-12 Annual Report and/or the BASMAA Regional POC Report.

Section 12 - Provision C.12 PCBs Controls

C.12.a.ii,iii ▶ Ongoing Training

(For FY 10-11 Annual Report and Each Annual Report Thereafter) List below or attach description of ongoing training development and inspections for PCB identification, including documentation and referral to appropriate regulatory agencies (e.g. county health departments, Department of Toxic Substances Control, California Department of Public Health, and the Water Board) as necessary.

Description:

See the FY 11-12 Program Annual Report for a description of training provided countywide at the April 25, 2012 Stormwater inspector Training Workshop.

C.12.b ▶ Conduct Pilot Projects to Evaluate Managing PCB-Containing Materials and Wastes during Building Demolition and Renovation Activities

C.12.c ▶ Pilot Projects to Investigate and Abate On-land Locations with Elevated PCB Concentrations

C.12.d ▶ Conduct Pilot Projects to Evaluate and Enhance Municipal Sediment Removal and Management Practices

C.12.e ▶ Conduct Pilot Projects to Evaluate On-Site Stormwater Treatment via Retrofit

C.12.f ▶ Diversion of Dry Weather and First Flush Flows to POTWs

C.12.g ▶ Monitor Stormwater PCB Pollutant Loads and Loads Reduced

C.12.h ▶ Fate and Transport Study of PCBs In Urban Runoff

C.12.i ▶ Development of a Risk Reduction Program Implemented Throughout the Region

State below if information is reported in a separate regional report. Municipalities that participate directly in regional activities to can provide descriptions below.

Summary

A summary of countywide Program and regional accomplishments for these sub-provisions are included within the C.12 PCB Controls section of the Program's FY 11-12 Annual Report and the BASMAA Regional POC Report.

Section 13 - Provision C.13 Copper Controls

C.13.a. iii.(1) ► Legal Authority: Architectural Copper

<p><i>(For FY 10-11 Annual Report only)</i> Do you have adequate legal authority to prohibit discharge of wastewater to storm drains generated from the installation, cleaning, treating, and washing of the surface of copper architectural features, including copper roofs to storm drains?</p>	X	Yes		No
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If **No**, explain and provide schedule for obtaining authority within 1 year.

C.13.a.iii.(2) ► Training, Permitting and Enforcement Activities

(FY 11-12 Annual Report and each Annual Report thereafter) Provide summaries of activities implemented to manage waste generated from cleaning and treating of copper architectural features, including copper roofs, during construction and post-construction including. :

- Development of BMPs on how to manage the water during and post construction
 - Requiring the use of appropriate BMPs when issuing building permits
 - Educating installers and operators on appropriate BMPs
 - Enforcement actions taken against noncompliance
-
- Development of BMPs - The Countywide Program collaborated with BASMAA to develop BMPs to manage waste generated from cleaning and treating of copper architectural features, including copper roofs, during construction and post construction.
 - Permitting Procedures to Require the BMPs- The Countywide Program updated its Stormwater Requirements Checklist to include the architectural copper BMPs in the list of source control measures that may apply to projects. During the design phase of a project, permit applicants are required to fill out and submit the Storm water Requirement Checklists to the City for review. The City also revised the Conditions of Approval for all development projects to control all waste generated from installing, cleaning and treating of copper architectural features.
 - Educate Installers and Operators -The Countywide Program, in collaboration with the Santa Clara Valley Urban Runoff Pollution Prevention Program, prepared an educational flyer on the BMP's. The City Construction Inspector attended the construction site inspection workshop on February 8, 2012, and the Senior Engineer attended the New Development Subcommittee meeting on February 14/April 3 which include training on copper features. The handout is given to any applicant who believe may have copper features with their project. Staff discussed BMP measures with applicant when they submit the projects.
 - Enforcement Actions against Noncompliance -The City adopted the same procedure as used in the Enforcement Response Plan. There were no non-compliant violations in this reporting period.

C.13.b. iii. ► Legal Authority: Pools, Spas, and Fountains

(For FY10-11 Annual Report only) Do you have adequate legal authority to prohibit discharges to storm drains from pools, spas, and fountains that contain copper-based chemicals?

X

Yes

No

If No, explain and provide schedule for obtaining authority within 1 year:

C.13.c ► Vehicle Brake Pads

Reported in a separate regional report.

A summary of the countywide Program’s participation with the Brake Pad Partnership (BPP) is included within the C.13 Copper Controls section of Countywide Program’s FY 11-12 Annual Report and/or the BASMAA Regional POC Report.

C.13.d.iii ► Industrial Sources Copper Reduction Results

Based upon inspection activities conducted under Provision C.4, highlight copper reduction results achieved among the facilities identified as potential users or sources of copper, facilities inspected, and BMPs addressed.

Summary

Facilities are inspected that could be potential users or sources of copper including automotive and machine shop facilities in the City. No violations related to copper were noted at any of these facilities inspection.

In addition, The City of Belmont Construction Inspector attended the Countywide Program’s April 25, 2012 Stormwater Inspector Training Workshop where industrial facility inspection MRP requirements related to copper were reviewed.

C.13.e ► Studies to Reduce Copper Pollutant Impact Uncertainties

Report on progress of studies being conducted countywide or regionally to reduce copper pollutant impact uncertainties. State below if information is reported in a separate regional report.

Summary

A summary of the Countywide Program’s and/or regional efforts to develop regional studies to reduce copper pollutant impact uncertainties is included within the C.13 Copper Controls section of the Countywide Program’s FY 11-12 Annual Report and/or BASMAA Regional POC Report.

Section 14 - Provision C.14 PBDE, Legacy Pesticides and Selenium Controls

C.14.a ► Control Programs for PBDEs, Legacy Pesticides and Selenium Controls

Report on progress of studies being conducted countywide or regionally to characterize the distribution and pathways of PBDEs, legacy pesticides, and selenium. State below if information is reported in a separate regional report.

Summary

A summary of the Countywide Program and regional efforts related to the Control Program for PBDEs, Legacy Pesticides and Selenium is included within the C.14 PBDE, Legacy Pesticides and Selenium section of Program's FY 11-12 Annual Report and/or BASMAA Regional POC Report.

Section 15 - Provision C.15 Exempted and Conditionally Exempted Discharges

C.15.b.iii.(1), C.15.b.iii.(2) ► Planned and Unplanned Discharges of Potable Water

Is your agency a water purveyor?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
If No , skip to C.15.b.vi.(2):				
If Yes , Complete the attached reporting tables or attach your own table with the same information. Provide any clarifying comments below.				
Comments: None				

C.15.b.vi.(2) ► Irrigation Water, Landscape Irrigation, and Lawn or Garden Watering

Provide implementation summaries of the required BMPs to promote measures that minimize runoff and pollutant loading from excess irrigation. Generally the categories are:

- Promote conservation programs
- Promote outreach for less toxic pest control and landscape management
- Promote use of drought tolerant and native vegetation
- Promote outreach messages to encourage appropriate watering/irrigation practices
- Implement Illicit Discharge Enforcement Response Plan for ongoing, large volume landscape irrigation runoff.

Summary:
 The City participates in countywide program outreach efforts which include: 1) Require appropriate site design measures and source controls in C.3 Regulated projects, and 2) Encourage the use of appropriate site design measures and source controls in all other projects subject to the municipal approval process.
 The agencies identify appropriate source controls based on the countywide program's Model List, which is on the Countywide Program's website, at the following link: http://www.flowstobay.org/documents/municipalities/nd/SMCQPPP%20MRP%20Sourcebook/Section%204/Source_Control-June15doc. The Model List includes source control measures related to minimizing runoff and pollutant loading from excess irrigation.
 City staff holds a bi-monthly coordinating meeting with the Mid-Peninsula Water District who is the purveyor of water supply in the area. In the meeting, City staff updates the District of the current storm-water protection regulations.
 C.3 New Development and Redevelopment- City staff implements illicit discharge enforcement for large volume irrigation runoff. City inspector performs educational outreach to residents reported to the city or discovered for over watering/irrigation practices.
 The water purveyor also participates in outreach to residents and businesses on the topics of vegetation and watering/irrigation practices. They also perform outreach with those who overwater.
 C.7, C.9- Public Information and Outreach- Outreach efforts have included OWOW material (less toxic pest control) and runoff/drainage in City events including National Public Works Week, staffed booth at the Earth Week cleanup and Coastal Cleanup-Creeks to Bay events. The City also participated in the San Mateo County Fair, in which less toxic pest control and gardening information was given out. In addition to events, the City

runs an advertisement continuously on local Channel 27 that lists Our Water Our World local participating stores that carry less toxic pest control and gardening products.

C.15.b.iii.(1) ► Planned Discharges of the Potable Water System

Site/ Location	Discharge Type	Receiving Waterbody(ies)	Date of Discharge	Duration of Discharge (military time)	Estimated Volume (gallons)	Estimated Flow Rate (gallons/day)	Chlorine Residual (mg/L)	pH (standard units)	Discharge Turbidity ⁶¹ (NTU)	Implemented BMPs & Corrective Actions
The City of Belmont is not a water purveyor. Attachment C.15.b.iii(1) Mid-Peninsular Water District supporting document attached										

⁶¹ Monitor the receiving water for turbidity if necessary and feasible. Include data in this column if available.

C.15.b.iii.(2) ► Unplanned Discharges of the Potable Water System ⁶²														
Site/ Location	Discharge Type	Receiving Waterbody(ies)	Date of Discharge	Discharge Duration (military time)	Estimated Volume (gallons)	Estimated Flow Rate (gallons/day)	Chlorine Residual (mg/L) ⁶³	pH (standard units) ⁵²	Discharge Turbidity (Visual) ⁵²	Implemented BMPs & Corrective Actions	Time of discharge discovery	Regulatory Agency Notification Time ⁶⁴	Inspector arrival time	Responding crew arrival time
The City of Belmont is not a water purveyor. Attachment C.15.b.iii(1) Mid-Peninsular Water District supporting document attached														

⁶² This table contains all of the unplanned discharges that occurred in this FY.

⁶³ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10% of your unplanned discharges, report all of the data collected.

⁶⁴ Notification to Water Board staff is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥ 50,000 gallons. Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety.

CITY OF BELMONT
MUNICIPAL REGIONAL REPORT

ATTACHMENTS



Stormwater Pump Station Form Inspections & Dry Season DO Monitoring

Date: 8/4/2011 **Time:** 7:15 AM

Staff Name: Ryan Moran **Pump Station:** Harbor Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/1).

DO Monitoring Type (check one):

- Routine Dry Season Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

- Pump Station Forebay Discharge Flow While Pump(s) Are Being Operated Other - Describe

DO Value (mg/L):

6.65 mg/L

Temperature (optional)

17.3 C°

Corrective Actions/s (check al that apply):

- | | |
|--|---|
| <input checked="" type="checkbox"/> None Needed, DO Levels OK | <input type="checkbox"/> Re-circulate Wet Well Water |
| <input type="checkbox"/> Adjust Float Level | <input type="checkbox"/> Clean Wet Well |
| <input type="checkbox"/> Deploy Temporary Aeration Device (Wet Well) | <input type="checkbox"/> Install Permanent Aeration Device (Wet Well) |
| <input type="checkbox"/> Deploy Temporary Aeration Structure/s (Outfall) | <input type="checkbox"/> Install Permanent Aeration Structure/s (Outfall) |
| <input type="checkbox"/> Other (Describe): | |

Comments: _____

Stormwater Pump Station Form Inspections & Dry Season DO Monitoring



PUMP STATION INSPECTION INFORMATION (Use this portion of form to document inspections).

Inspection Type (check all that apply):

Wet season

Dry season DO testing

Dry weather collectio system
screening

Catchment Area Type (If Known, Estimate Percent of Land Use for Each Type Listed Below):

30 Industrial

40 Commercial

30 Residential

0 Park & Open Space

OBSERVATIONS (check all that apply):

Trash

Not Present

Present

If trash present, visually estimate the quantity:

Odor

Absent

Present

_____ no. of 32 gallon bags

Color

Absent

Present

Turbidity

Not Detected

Low

Medium

High

Hydrocarbon Sheen

Not Detected

Low

Medium

High

WASTES REMOVED FROM PUMP STATION:

Estimate the volume or mass of waste materials removed, if any, from the pump station:

None.

Comments (Include information about any illicit discharges and illegal dumping problems found):

**Stormwater Pump Station Form
Inspections & Dry Season DO Monitoring**



Date: 8/23/2011

Time: 9:00 AM

Staff Name: Ryan Moran

Pump Station: Harbor Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/l).

DO Monitoring Type (check one):

Routine Dry Season

Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

Pump Station Forebay

Discharge Flow While Pump(s) Are Being Operated

Other - Describe

DO Value (mg/L):

6.91 mg/L

Temperature (optional)

17.4 C°

Corrective Actions/s (check al that apply):

None Needed, DO Levels OK

Re-circulate Wet Well Water

Adjust Float Level

Clean Wet Well

Deploy Temporary Aeration Device (Wet Well)

Install Permanent Aeration Device (Wet Well)

Deploy Temporary Aeration Structure/s (Outfall)

Install Permanent Aeration Structure/s (Outfall)

Other (Describe):

Comments: _____

Stormwater Pump Station Form Inspections & Dry Season DO Monitoring



PUMP STATION INSPECTION INFORMATION (Use this portion of form to document inspections).

Inspection Type (check all that apply):

Wet season

Dry season DO testing

Dry weather collectio system
screening

Catchment Area Type (If Known, Estimate Percent of Land Use for Each Type Listed Below):

30 Industrial

40 Commercial

30 Residential

0 Park & Open Space

OBSERVATIONS (check all that apply):

Trash

Not Present

Present

If trash present, visually estimate the quantity:

Odor

Absent

Present

_____ no. of 32 gallon bags

Color

Absent

Present

Turbidity

Not Detected

Low

Medium

High

Hydrocarbon Sheen

Not Detected

Low

Medium

High

WASTES REMOVED FROM PUMP STATION:

Estimate the volume or mass of waste materials removed, if any, from the pump station:

None.

Comments (Include information about any illicit discharges and illegal dumping problems found):

**Stormwater Pump Station Form
Inspections & Dry Season DO Monitoring**



Date: 4/12/2012

Time: 9:00 AM

Staff Name: Marcus Escobedo

Pump Station: Harbor Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/l).

DO Monitoring Type (check one):

Routine Dry Season

Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

Pump Station Forebay

Discharge Flow While Pump(s) Are Being Operated

Other - Describe

DO Value (mg/L): _____

Temperature (optional) _____

Corrective Actions/s (check al that apply):

None Needed, DO Levels OK

Re-circulate Wet Well Water

Adjust Float Level

Clean Wet Well

Deploy Temporary Aeration Device (Wet Well)

Install Permanent Aeration Device (Wet Well)

Deploy Temporary Aeration Structure/s (Outfall)

Install Permanent Aeration Structure/s (Outfall)

Other (Describe):

Comments: _____

Stormwater Pump Station Form Inspections & Dry Season DO Monitoring



PUMP STATION INSPECTION INFORMATION (Use this portion of form to document inspections).

Inspection Type (check all that apply):

- Wet season
 Dry season DO testing
 Dry weather collectio system screening

Catchment Area Type (If Known, Estimate Percent of Land Use for Each Type Listed Below):

- 30 Industrial
 40 Commercial
 30 Residential
 0 Park & Open Space

OBSERVATIONS (check all that apply):

Trash

- Not Present
 Present

If trash present, visually estimate the quantity:

Odor

- Absent
 Present

_____ no. of 32 gallon bags

Color

- Absent
 Present

Turbidity

- Not Detected
 Low
 Medium
 High

Hydrocarbon Sheen

- Not Detected
 Low
 Medium
 High

WASTES REMOVED FROM PUMP STATION:

Estimate the volume or mass of waste materials removed, if any, from the pump station:

None.

Comments (Include information about any illicit discharges and illegal dumping problems found):

**Stormwater Pump Station Form
Inspections & Dry Season DO Monitoring**



Date: _____ 10/5/2011

Time: _____ 2:30 PM

Staff Name: _____ Ryan Moran

Pump Station: _____ Harbor Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/l).

DO Monitoring Type (check one):

Routine Dry Season

Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

Pump Station Forebay

Discharge Flow While Pump(s) Are Being Operated

Other - Describe

DO Value (mg/L): _____

Temperature (optional) _____

Corrective Actions/s (check al that apply):

None Needed, DO Levels OK

Re-circulate Wet Well Water

Adjust Float Level

Clean Wet Well

Deploy Temporary Aeration Device (Wet Well)

Install Permanent Aeration Device (Wet Well)

Deploy Temporary Aeration Structure/s (Outfall)

Install Permanent Aeration Structure/s (Outfall)

Other (Describe):

Comments: _____

**Stormwater Pump Station Form
Inspections & Dry Season DO Monitoring**



Date: 8/4/2011

Time: 7:45 AM

Staff Name: Ryan Moran

Pump Station: Ralston Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/1).

DO Monitoring Type (check one):

Routine Dry Season

Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

Pump Station Forebay

Discharge Flow While Pump(s) Are Being Operated

Other - Describe

DO Value (mg/L):

3.18 mg/L

Temperature (optional)

18.2 C°

Corrective Actions/s (check al that apply):

None Needed, DO Levels OK

Re-circulate Wet Well Water

Adjust Float Level

Clean Wet Well

Deploy Temporary Aeration Device (Wet Well)

Install Permanent Aeration Device (Wet Well)

Deploy Temporary Aeration Structure/s (Outfall)

Install Permanent Aeration Structure/s (Outfall)

Other (Describe):

Comments: _____

Stormwater Pump Station Form Inspections & Dry Season DO Monitoring



PUMP STATION INSPECTION INFORMATION (Use this portion of form to document inspections).

Inspection Type (check all that apply):

Wet season

Dry season DO testing

Dry weather collectio system
screening

Catchment Area Type (If Known, Estimate Percent of Land Use for Each Type Listed Below):

30 Industrial

40 Commercial

30 Residential

0 Park & Open Space

OBSERVATIONS (check all that apply):

Trash

Not Present

Present

If trash present, visually estimate the quantity:

Odor

Absent

Present

_____ no. of 32 gallon bags

Color

Absent

Present

Turbidity

Not Detected

Low

Medium

High

Hydrocarbon Sheen

Not Detected

Low

Medium

High

WASTES REMOVED FROM PUMP STATION:

Estimate the volume or mass of waste materials removed, if any, from the pump station:

None.

Comments (Include information about any illicit discharges and illegal dumping problems found):

**Stormwater Pump Station Form
Inspections & Dry Season DO Monitoring**



Date: 8/23/2011

Time: 8:30 AM

Staff Name: Ryan Moran

Pump Station: Ralston Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/l).

DO Monitoring Type (check one):

Routine Dry Season

Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

Pump Station Forebay

Discharge Flow While Pump(s) Are Being Operated

Other - Describe

DO Value (mg/L):

3.12 mg/L

Temperature (optional)

18.4 C°

Corrective Actions/s (check al that apply):

None Needed, DO Levels OK

Re-circulate Wet Well Water

Adjust Float Level

Clean Wet Well

Deploy Temporary Aeration Device (Wet Well)

Install Permanent Aeration Device (Wet Well)

Deploy Temporary Aeration Structure/s (Outfall)

Install Permanent Aeration Structure/s (Outfall)

Other (Describe):

Comments: _____

Stormwater Pump Station Form Inspections & Dry Season DO Monitoring



PUMP STATION INSPECTION INFORMATION (Use this portion of form to document inspections).

Inspection Type (check all that apply):

Wet season

Dry season DO testing

Dry weather collectio system
screening

Catchment Area Type (If Known, Estimate Percent of Land Use for Each Type Listed Below):

30 Industrial

40 Commercial

30 Residential

0 Park & Open Space

OBSERVATIONS (check all that apply):

Trash

Not Present

Present

If trash present, visually estimate the quantity:

Odor

Absent

Present

_____ no. of 32 gallon bags

Color

Absent

Present

Turbidity

Not Detected

Low

Medium

High

Hydrocarbon Sheen

Not Detected

Low

Medium

High

WASTES REMOVED FROM PUMP STATION:

Estimate the volume or mass of waste materials removed, if any, from the pump station:

None.

Comments (Include information about any illicit discharges and illegal dumping problems found):

**Stormwater Pump Station Form
Inspections & Dry Season DO Monitoring**



Date: _____ 4/12/2012

Time: _____ 9:30 AM

Staff Name: _____ Marcus Escobedo

Pump Station: _____ Ralston Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/l).

DO Monitoring Type (check one):

Routine Dry Season

Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

Pump Station Forebay

Discharge Flow While Pump(s) Are Being Operated

Other - Describe

DO Value (mg/L):

Temperature (optional)

Corrective Actions/s (check al that apply):

None Needed, DO Levels OK

Re-circulate Wet Well Water

Adjust Float Level

Clean Wet Well

Deploy Temporary Aeration Device (Wet Well)

Install Permanent Aeration Device (Wet Well)

Deploy Temporary Aeration Structure/s (Outfall)

Install Permanent Aeration Structure/s (Outfall)

Other (Describe):

Comments: _____

Stormwater Pump Station Form Inspections & Dry Season DO Monitoring



Date: 10/5/2011

Time: 2:00 PM

Staff Name: Ryan Moran

Pump Station: Ralston Storm

DISSOLVED OXYGEN MONITORING (Use this portion of the form for dry season DO monitoring and needed follow up corrective actions if DO level(s) are at or below 3 mg/l).

DO Monitoring Type (check one):

Routine Dry Season

Follow-up Testing After Implementing Corrective Actions

Location of DO Testing (check one):

Pump Station Forebay

Discharge Flow While Pump(s) Are Being Operated

Other - Describe

DO Value (mg/L): _____

Temperature (optional) _____

Corrective Actions/s (check al that apply):

None Needed, DO Levels OK

Re-circulate Wet Well Water

Adjust Float Level

Clean Wet Well

Deploy Temporary Aeration Device (Wet Well)

Install Permanent Aeration Device (Wet Well)

Deploy Temporary Aeration Structure/s (Outfall)

Install Permanent Aeration Structure/s (Outfall)

Other (Describe):

Comments: _____

Stormwater Pump Station Form Inspections & Dry Season DO Monitoring



PUMP STATION INSPECTION INFORMATION (Use this portion of form to document inspections).

Inspection Type (check all that apply):

Wet season

Dry season DO testing

Dry weather collectio system
screening

Catchment Area Type (If Known, Estimate Percent of Land Use for Each Type Listed Below):

30 Industrial

40 Commercial

30 Residential

0 Park & Open Space

OBSERVATIONS (check all that apply):

Trash

Not Present

Present

If trash present, visually estimate the quantity:

Odor

Absent

Present

_____ no. of 32 gallon bags

Color

Absent

Present

Turbidity

Not Detected

Low

Medium

High

Hydrocarbon Sheen

Not Detected

Low

Medium

High

WASTES REMOVED FROM PUMP STATION:

Estimate the volume or mass of waste materials removed, if any, from the pump station:

None.

Comments (Include information about any illicit discharges and illegal dumping problems found):

Municipal Corporation Yard Inspection Form

Municipality: City of Belmont

Location of Corporation Yard Inspected: 110 Sem Lane

Date and Time of Inspection: 6-8-11 8:00 AM

Name of Person and Position Conducting Inspection: RICK LOCKE, FIELD SUPERVISOR

A. General Good Housekeeping BMPs Being Implemented (Check all that were observed/determined):

- Clean and orderly Corporation Yard maintained
- Materials with potential to discharge to stormwater covered prior to rains
 - Not able to determine during inspection
- Containers are not overfilled and lids are kept closed when not in use
- Storm drain inlet labels are maintained
- A sufficient number of covered litter receptacles are used and maintained
- Materials and wastes are stored as far away from storm drain inlets as practicable
- Vehicles and equipment are maintained to minimize drips and leakage
- Spill containment kits/clean up materials available at locations where there are potential for spills
- Dry clean up methods are used for any spills or leaks
- Corporation yard maintenance staff has been trained to use BMPs listed in the Corporation Yard's Site Specific Stormwater Pollution Prevention Plan
- Describe any improvements needed: NONE

B. Vehicle and Equipment Washing (Check all that were observed/determined):

- Vehicle and/or equipment washing occurs at the Corporation Yard
 - Washing activities are located under a roof or in a building equipped with a municipal sewer connection
 - Vehicle washing area is adequately sized for vehicles being washed and to minimize drag-out from washed vehicles so there is no flow to storm drain inlets
 - Vehicle washing oil-water separators that are connected to the sanitary sewer system are maintained and cleaned out on a regular schedule
 - Outdoor equipment steam cleaning area (used only by Fleet Management) has the following BMPs implemented:
 - Wash area is paved and graded to prevent washwater from flowing off and stormwater from adjoining areas from flowing onto the wash area
 - Wash area is sloped to collect washwater
 - Washwaters drain to an oil-water separator connected to the sanitary sewer
 - Describe any improvements needed: NONE

C. Vehicle and Equipment Maintenance and Repair (Check all that were observed/determined):

- Vehicle and/or equipment maintenance occurs at the Corporation Yard

- Vehicle and/or equipment maintenance are conducted indoors whenever feasible
- Drain and drip pans or open containers of fluids are not left lying around
- Vehicle and/or equipment maintenance and repair area is swept at least weekly
- Drip pans are used under leaky vehicles and equipment, and absorbent pads and materials are used as appropriate
- All fluids from wrecked vehicles are drained immediately using an adequately sized drain or drip pan
 - Not able to determine during inspection
- Used absorbent material from cleaning small spills is promptly and properly removed
- Vehicle and equipment maintenance are not performed outdoors during rain events unless required by emergency conditions
 - Not able to determine during inspection
- If temporary work must be conducted outdoors, a tarp, ground cloth, or drip pan is placed under the vehicle or equipment to capture spills and drips
 - Not able to determine during inspection
- Describe any improvements needed: NONE

D. Fuel Dispensing (Check all that were observed/determined):

- Fuel dispensing occurs at the Corporation Yard
- Fuel dispensing area is covered by a roof or canopy so that rainwater cannot contact the fueling area
- Fueling area is paved with Portland cement (or an equivalent smooth, impervious surface) with a 2 to 4% slope to prevent ponding
- Signs are posted to remind employees not to top off fuel tank
- Current spill response plan is available for fuel dispensing
- Fueling area is inspected daily during use and any deficiencies found are corrected
- Describe any improvements needed: NONE.

E. Municipal Vehicle, Heavy Equipment, and Employee Parking (Check all that were observed/determined):

- Parking lots are swept at least weekly to prevent accumulation of trash and litter
- When surface cleaning is conducted, BASMAA's "Pollution from Surface Cleaning" BMPs are used
 - Not able to determine during inspection
- Paving and other equipment that has the potential to drip have drip pans or absorbent materials placed under the equipment to contain any leaks or spills
- Heavy equipment is inspected for leaks during each work day and repairs are made as soon as possible
- Drip pans or absorbent material are used under leaking vehicles and equipment until repairs are made
- Parking lots are inspected at least weekly to assure BMPs are used
- Describe any improvements needed: NONE

F. Waste and Recycling Storage (Check all that were observed/determined):

- Dumpster and waste recycling areas are inspected, swept, and picked up daily during work days
- Rubbish and recyclables that have been collected from streets and storm drains are stored under a roof or cover, if possible

- Street sweeping waste and materials removed during storm drain cleaning are stored on a concrete or asphalt pad in a contained area. Water including decanted water from collected wastes drains to sanitary sewer or is allowed to evaporate so it doesn't flow to storm drain inlets
- Hazardous wastes are stored in compliance with hazardous waste regulations
- Describe any improvements needed: NONE.

G. Outdoor Material Storage (Check all that were observed/determined):

- Material is stored outdoors at Corporation Yard
 - To the extent feasible materials that must be stored outside are stored in a roofed area
 - Stockpiles of raw materials that cannot be stored under a roof are kept covered when the material is not being used
 - If stockpiles are so large that they cannot feasibly be stored under a roof or covered, erosion control BMPs are used at the perimeter of the stockpile and sediment controls BMPs at downstream storm drain inlet(s)
 - Fluids are stored within secondary containment to prevent accidental release
 - Caution and control are used when transferring liquids to minimize spills
 - Not able to determine during inspection
 - Containers are kept out of pooled or standing water
 - Not able to determine during inspection
 - Storage areas are inspected regularly to detect any leaks and spills
 - Describe any improvements needed: NONE

Additional Comments: _____

Signature: Richard L. Locke



Municipal Corporation Yard Inspection Form

Municipality: City of Belmont

Location of Corporation Yard Inspected: 110 Sem Lane

Date and Time of Inspection: 10-12-11 4:00 P.M.

Name of Person and Position Conducting Inspection: RICK LOCKE, FIELD SUPERVISOR

A. General Good Housekeeping BMPs Being Implemented (Check all that were observed/determined):

- Clean and orderly Corporation Yard maintained
- Materials with potential to discharge to stormwater covered prior to rains
 - Not able to determine during inspection
- Containers are not overfilled and lids are kept closed when not in use
- Storm drain inlet labels are maintained
- A sufficient number of covered litter receptacles are used and maintained
- Materials and wastes are stored as far away from storm drain inlets as practicable
- Vehicles and equipment are maintained to minimize drips and leakage
- Spill containment kits/clean up materials available at locations where there are potential for spills
- Dry clean up methods are used for any spills or leaks
- Corporation yard maintenance staff has been trained to use BMPs listed in the Corporation Yard's Site Specific Stormwater Pollution Prevention Plan
- Describe any improvements needed: NONE

B. Vehicle and Equipment Washing (Check all that were observed/determined):

- Vehicle and/or equipment washing occurs at the Corporation Yard
 - Washing activities are located under a roof or in a building equipped with a municipal sewer connection
 - Vehicle washing area is adequately sized for vehicles being washed and to minimize drag-out from washed vehicles so there is no flow to storm drain inlets
 - Vehicle washing oil-water separators that are connected to the sanitary sewer system are maintained and cleaned out on a regular schedule
 - Outdoor equipment steam cleaning area (used only by Fleet Management) has the following BMPs implemented:
 - Wash area is paved and graded to prevent washwater from flowing off and stormwater from adjoining areas from flowing onto the wash area
 - Wash area is sloped to collect washwater
 - Washwaters drain to an oil-water separator connected to the sanitary sewer
 - Describe any improvements needed: NONE

C. Vehicle and Equipment Maintenance and Repair (Check all that were observed/determined):

- Vehicle and/or equipment maintenance occurs at the Corporation Yard

- Vehicle and/or equipment maintenance are conducted indoors whenever feasible
- Drain and drip pans or open containers of fluids are not left lying around
- Vehicle and/or equipment maintenance and repair area is swept at least weekly
- Drip pans are used under leaky vehicles and equipment, and absorbent pads and materials are used as appropriate
- All fluids from wrecked vehicles are drained immediately using an adequately sized drain or drip pan
 - Not able to determine during inspection
- Used absorbent material from cleaning small spills is promptly and properly removed
- Vehicle and equipment maintenance are not performed outdoors during rain events unless required by emergency conditions
 - Not able to determine during inspection
- If temporary work must be conducted outdoors, a tarp, ground cloth, or drip pan is placed under the vehicle or equipment to capture spills and drips
 - Not able to determine during inspection
- Describe any improvements needed: NONE

D. Fuel Dispensing (Check all that were observed/determined):

- Fuel dispensing occurs at the Corporation Yard
 - Fuel dispensing area is covered by a roof or canopy so that rainwater cannot contact the fueling area
 - Fueling area is paved with Portland cement (or an equivalent smooth, impervious surface) with a 2 to 4% slope to prevent ponding
 - Signs are posted to remind employees not to top off fuel tank
 - Current spill response plan is available for fuel dispensing
 - Fueling area is inspected daily during use and any deficiencies found are corrected
 - Describe any improvements needed: NONE

E. Municipal Vehicle, Heavy Equipment, and Employee Parking (Check all that were observed/determined):

- Parking lots are swept at least weekly to prevent accumulation of trash and litter
- When surface cleaning is conducted, BASMAA's "Pollution from Surface Cleaning" BMPs are used
 - Not able to determine during inspection
- Paving and other equipment that has the potential to drip have drip pans or absorbent materials placed under the equipment to contain any leaks or spills
- Heavy equipment is inspected for leaks during each work day and repairs are made as soon as possible
- Drip pans or absorbent material are used under leaking vehicles and equipment until repairs are made
- Parking lots are inspected at least weekly to assure BMPs are used
- Describe any improvements needed: NONE

F. Waste and Recycling Storage (Check all that were observed/determined):

- Dumpster and waste recycling areas are inspected, swept, and picked up daily during work days
- Rubbish and recyclables that have been collected from streets and storm drains are stored under a roof or cover, if possible

- Street sweeping waste and materials removed during storm drain cleaning are stored on a concrete or asphalt pad in a contained area. Water including decanted water from collected wastes drains to sanitary sewer or is allowed to evaporate so it doesn't flow to storm drain inlets
- Hazardous wastes are stored in compliance with hazardous waste regulations
- Describe any improvements needed: NONE

G. Outdoor Material Storage (Check all that were observed/determined):

- Material is stored outdoors at Corporation Yard
 - To the extent feasible materials that must be stored outside are stored in a roofed area
 - Stockpiles of raw materials that cannot be stored under a roof are kept covered when the material is not being used
 - If stockpiles are so large that they cannot feasibly be stored under a roof or covered, erosion control BMPs are used at the perimeter of the stockpile and sediment controls BMPs at downstream storm drain inlet(s)
 - Fluids are stored within secondary containment to prevent accidental release
 - Caution and control are used when transferring liquids to minimize spills
 - Not able to determine during inspection
 - Containers are kept out of pooled or standing water
 - Not able to determine during inspection
 - Storage areas are inspected regularly to detect any leaks and spills
 - Describe any improvements needed: NONE

Additional Comments: _____

Signature: Richard L. Locke

**STANDARD TREATMENT MEASURE
OPERATION AND MAINTENANCE (O & M)
INSPECTION REPORT**

Nikon Precision Inc.



Model O&M Agreement Guidance

Attachment B:

Standard Treatment Measure Operation and Maintenance Inspection Report

**Exhibit A to the
Maintenance Agreement between
City of Belmont
and
Nikon Precision Inc.**

***Standard Treatment Measure Operation and Maintenance
Inspection Report***

**Stormwater Treatment Measure Operation and Maintenance
Inspection Report to the [[= City of Belmont=]], California**

This report and attached Inspection and Maintenance Checklists document the inspection and maintenance conducted for the identified stormwater treatment measure(s) subject to the Maintenance Agreement between the City and the property owner during the annual reporting period indicated below.

I. Property Information:

Property Address or APN: 1399 Shoreway Rd.
Belmont, Ca. 94002

Property Owner: Nikon Precision Inc.

II. Contact Information:

Name of person to contact regarding this report: James Bryant

Phone number of contact person: 650-245-9443 Email: jbryant@nikon.com

Address to which correspondence regarding this report should be directed:

1399 Shoreway Rd.

Belmont, Ca. 94002

III. Reporting Period:

This report, with the attached completed inspection checklists, documents the inspections and maintenance of the identified treatment measures during the time period from 2/5/2011 to 1/10/2012.

IV. Stormwater Treatment Measure Information:

The following stormwater treatment measures (identified treatment measures) are located on the property identified above and are subject to the Maintenance Agreement:

Identifying Number of Treatment Measure	Type of Treatment Measure	Location of Treatment Measure on the Property
01	Crescent shaped bioswales	Center of parking lot
02	Linear bioswales	North property line

V. Summary of Inspections and Maintenance:

Summarize the following information using the attached Inspection and Maintenance Checklists:

Identifying Number of Treatment Measure	Date of Inspection	Operation and Maintenance Activities Performed and Date(s) Conducted	Additional Comments
01	1/10/2012	Condition of drain inlet grates being open for free flow.	Removed tanbark from perimeter of grates.
02	1/10/2012	Inspect ponding depth.	No ponds formed.
03	1/10/2012	Confirm permeability of bio material.	Confirmed.
04	1/10/2012	Confirm free flow of parking surface edge.	Confirmed.
05	1/10/2012	Confirm bioswale vegetation is alive and functional.	Alive and in place.

VI. Sediment Removal:

Total amount of accumulated sediment removed from the stormwater treatment measure(s) during the reporting period: .05 cubic yards.

How was sediment disposed?

- landfill
- other location on-site as described in and allowed by the maintenance plan
- other, explain _____

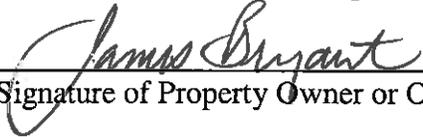
VII. Inspector Information:

The inspections documented in the attached Inspection and Maintenance Checklists were conducted by the following inspector(s):

Inspector Name and Title	Inspector's Employer and Address
Jim Bryant / Facilities Supervisor	Nikon Precision Inc. 1399 Shoreway Rd. Belmont, Ca. 94002

VIII. Certification:

I hereby certify, under penalty of perjury, that the information presented in this report and attachments is true and complete:



Signature of Property Owner or Other Responsible Party

Date 1/10/2012

James Bryant

Type or Print Name

Nikon Precision Inc.

Company Name

1399 Shoreway Rd.

Belmont, Ca. 94002

Address

Phone number: 650-245-9443 Email: jbryant@nikon.com

**Attachments to the
Treatment Measure Operation and Maintenance
Inspection Report:
Completed Inspection Checklists**

**Nikon Precision Inc.
O&M Agreement Guidance**

Attachment C:

Model Inspection & Maintenance Checklists

DRAFT

Inspection and Maintenance Checklist Vegetated Swale

Property Address: 1399 Shoreway Rd.
Belmont, Ca. 94002
Property Owner: Nikon Precision Inc.

Treatment Measure No.: 01 Date of Inspection: 1/10/2012 Type of Inspection: Pre-rainy season Monthly Quarterly

Annual

Inspector(s): James Bryant

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Sediment Accumulation on Vegetation	Sediment depth exceeds 2 inches.	No	No sediment present	Sediment deposits on vegetated treatment area of the swale removed. When finished, swale should be level from side to side and drain freely toward outlet. There should be no areas of standing water once inflow has ceased.
Standing Water	When water stands in the swale between storms and does not drain freely.	No	No standing water.	There should be no areas of standing water once inflow has ceased. Any of the following may apply: sediment or trash blockages removed, improved grade from head to foot of swale, removed clogged check dams, added underdrains or converted to a wet swale.
Flow spreader (if any)	Flow spreader uneven or clogged so that flows are not uniformly distributed through entire swale width.	No	No flow spreaders.	Spreader leveled and cleaned so that flows are spread evenly over entire swale width.
Constant Baseflow	When small quantities of water continually flow through the swale, even when it has been dry for weeks, and an eroded, muddy channel has formed in the swale bottom.	No	No continual flow of water.	No eroded, muddy channel on the bottom. A low-flow pea-gravel drain may be added the length of the swale.
Poor Vegetation Coverage	When planted vegetation is sparse or bare or eroded patches occur in more than 10% of the swale bottom.	No	Vegetation present, full coverage of tanbark.	Vegetation coverage in more than 90% of the swale bottom. Determine why growth of planted vegetation is poor and correct that condition. Re-plant with plugs of vegetation from the upper slope: plant in the swale bottom at 8-inch intervals, or re-seed into loosened, fertile soil.

DRAFT Vegetated Swale Inspection Checklist

Property Address: _____

Date: _____

Treatment Measure No.: _____

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Vegetation	When the planted vegetation becomes excessively tall; when nuisance weeds and other vegetation start to take over.	No	Vegetation 5 years old plus, all's fine.	Vegetation mowed per specifications or maintenance plan, or nuisance vegetation removed so that flow is not impeded. Vegetation should never be mowed lower than the design flow depth. Remove clippings from the swale and dispose appropriately.
Excessive Shading	Growth of planted vegetation is poor because sunlight does not reach swale.	No	No shade.	Healthy growth of planted vegetation. If possible, trim back over-hanging limbs and remove brushy vegetation on adjacent slopes.
Inlet/Outlet	Inlet/outlet areas clogged with sediment and/or debris.	No		Material removed so that there is no clogging or blockage in the inlet and outlet areas.
Trash and Debris Accumulation	Trash and debris accumulated in the swale.	No		Trash and debris removed from swale.
Erosion/ Scouring	Eroded or scoured swale bottom due to flow channelization, or higher flows.	No		No erosion or scouring in swale bottom. For ruts or bare areas less than 12 inches wide, repair the damaged area by filling with crushed gravel. If bare areas are large, generally greater than 12 inches wide, the swale should be re-graded and re-seeded. For smaller bare areas, overseed when bare spots are evident, or take plugs of grass from the upper slope and plant in the swale bottom at 8-inch intervals.

DRAFT

Inspection and Maintenance Checklist Detention Basin

Property Address: 1399 Shoreway Rd.
Belmont, Ca. 94002
Property Owner: Nikon Precision Inc.

Treatment Measure No.: 01 Date of Inspection 1/10/2012 Type of Inspection: Pre-rainy season Monthly Quarterly

Annual

Inspector(s): James Bryant

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
General				
Trash & Debris	<ul style="list-style-type: none"> • Trash and debris accumulated in basin • Visual evidence of dumping 	No		Trash and debris cleared from site.
Poisonous Vegetation and noxious weeds	Poisonous or nuisance vegetation or noxious weeds, e.g., morning glory, English ivy, reed canary grass, Japanese knotweed, purple loosestrife, blackberry, Scotch broom, poison oak, stinging nettles, or devil's club	No		Use Integrated Pest Management techniques to control noxious weeds or invasive species.
Contaminants and Pollution	Any evidence of oil, gasoline, contaminants or other pollutants	No		No contaminants or pollutants present.
Rodent Holes	If facility acts as a dam or berm, any evidence of rodent holes, or any evidence of water piping through dam or berm via rodent holes	No		The design specifications are not compromised by holes. Any rodent control activities are in accordance with applicable laws and do not affect any protected species.

DRAFT Detention Basin Inspection Checklist

Property Address: _____

Date: _____

Treatment Measure No.: _____

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Insects	Insects such as wasps and hornets interfere with maintenance activities.	No		Insects do not interfere with maintenance activities.
Tree/Brush Growth and Hazard Trees	<ul style="list-style-type: none"> Growth does not allow maintenance access or interferes with maintenance activity Dead, diseased, or dying trees 	No		<ul style="list-style-type: none"> Trees do not hinder maintenance activities. Remove hazard trees as approved by the City. (Use a certified Arborist to determine health of tree or removal requirements)
Side Slopes				
Erosion	<ul style="list-style-type: none"> Eroded over 2 in. deep where cause of damage is still present or where there is potential for continued erosion. Any erosion on a compacted berm embankment. 	No		Cause of erosion is managed appropriately. Side slopes or berm are restored to design specifications, as needed.
Storage Area				
Sediment	Accumulated sediment >10% of designed basin depth or affects inletting or outletting condition of the facility.	No		Sediment cleaned out to designed basin shape and depth; basin reseeded if necessary to control erosion.
Liner (If Applicable)	Liner is visible and has more than three 1/4-inch holes in it.	No		Liner repaired or replaced. Liner is fully covered.
Emergency Overflow/ Spillway and Berms				
Settlement	Berm settlement 4 inches lower than the design elevation.	No		Dike is built back to the design elevation.

DRAFT Detention Basin Inspection Checklist

Date: _____

Property Address: _____

Treatment Measure No.: _____

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Tree Growth	Tree growth on berms or emergency spillway >4 ft in height or covering more than 10% of spillway.	No		<ul style="list-style-type: none"> • Trees should be removed. If root system is small (base less than 4 inches) the root system may be left in place. Otherwise the roots should be removed and the berm restored. • A civil engineer should be consulted for proper berm/spillway restoration.
Emergency Overflow/ Spillway	Rock is missing and soil is exposed at top of spillway or outside slope.	No		Rocks and pad depth are restored to design standards.
Debris Barriers (e.g., Trash Racks)				
Trash and Debris	Trash or debris is plugging openings in the barrier.	No		Trash or debris is removed.
Damaged/ Missing Bars	Bars are missing, loose, bent out of shape, or deteriorating due to excessive erust.	No		Bars are repaired or replaced to allow proper functioning of trash rack.
Inlet/Outlet Pipe	Debris barrier is missing or not attached to pipe	No		Debris barrier is repaired or replaced to allow proper functioning of trash rack.
Fencing and Gates				
Missing or broken parts	Any defect in or damage to the fence or gate that permits easy entry to a facility.	No		Fencing and gate are restored to design specifications
Deteriorating Paint or Protective Coating	Part or parts that have a rusting or scaling condition that has affected structural adequacy.	No		Paint or protective coating is sufficient to protect structural adequacy of fence or gate.

DRAFT

Inspection and Maintenance Checklist Any Treatment Measure

Property Address: 1399 Shoreway Rd.
Belmont, Ca. 94002
Property Owner: Nikon Precision Inc.

Treatment Measure No.: 01 Date of Inspection 1/10/2012 Type of Inspection: Pre-rainy season Monthly Quarterly
 Annual

Inspector(s): James Bryant

(Nonapplicable fields are shaded out.) Fill in percentages or depth numbers when possible.

Facility Component	Trash/Debris	Erosion/Bank Failure/Channel Formation	Sediment Accumulation	Vegetation	Structural Deficiency (list)	Ponding Water	Pests	Odors	Visible Sheen, etc.	Maintenance Action Taken
Access Road/Structure	None	No	None	No	None	None	None		None	None
Inlet	None	No	2 inch.	No	None	None	None		None	Cleaned out
Facility Structure			None	No	None	None	None			None
Sedimentation Facility	None	No	2 inch	No	None	None	None	None	None	Cleaned out
Treatment Media	None	No	None	No		None	None	None	None	None
Vegetation	None	No	None	No	None	None	None	None	None	None
Outlet Orifice	None	No	None	No	None	None	None			None
Bypass Overflow	None	No	None	No	None	None	None		None	None
Fence, Signs, Valves, etc.	None			No	None		None			None

Other Observations _____

DRAFT Detention Basin Inspection Checklist

Date: _____

Property Address: _____

Treatment Measure No.: _____

**STANDARD TREATMENT MEASURE
OPERATION AND MAINTENANCE (O & M)
INSPECTION REPORT**

Notre Dame de Namur University



Turned in 4/17/12
Dept of Pub Works
1500 Ralston Avenue, Belmont, CA 94002
corrected 7/9/12
Debbie Maffeo

**Stormwater Treatment Measure Operation and Maintenance
Inspection Report to the CITY OF BELMONT, California**

This report and attached Inspection and Maintenance Checklists document the inspection and maintenance conducted for the identified stormwater treatment measure(s) subject to the Maintenance Agreement between the City and the property owner during the annual reporting period indicated below.

I. Property Information:

Property Address or APN: 1500 RALSTON AVENUE, BELMONT, CA 94002
Property Owner: NOTRE DAME DE NAMUR UNIVERSITY

II. Contact Information:

Name of person to contact regarding this report: Ryan Martini, Director of Facilities
Phone number of contact person: 650-508-3559 Email: rmartini@ndnu.edu
Address to which correspondence regarding this report should be directed:
1500 Ralston Avenue, Belmont, CA 94002

III. Reporting Period:

This report, with the attached completed inspection checklists, documents the inspections and maintenance of the identified treatment measures during the time period from
January 2011 to December 31, 2011

IV. Stormwater Treatment Measure Information:

The following stormwater treatment measures (identified treatment measures) are located on the property identified above and are subject to the Maintenance Agreement:

Identifying Number of Treatment Measure	Type of Treatment Measure	Location of Treatment Measure on the Property
1	Bioswale	South of Building
2	Storm Drains	In hardscape & planting areas around building

V. Summary of Inspections and Maintenance:

Summarize the following information using the attached Inspection and Maintenance Checklists:

Identifying Number of Treatment Measure	Date of Inspection	Operation and Maintenance Activities Performed and Date(s) Conducted	Additional Comments
1	12/11	Cleared of dead leaf debris	
2	12/11	Cleared of dead leaf debris	

VI. Sediment Removal:

Total amount of accumulated sediment removed from the stormwater treatment measure(s) during the reporting period: 2 cubic yards.

How was sediment disposed?

- landfill
- other location on-site as described in and allowed by the maintenance plan
- other, explain _____

VII. Inspector Information:

The inspections documented in the attached Inspection and Maintenance Checklists were conducted by the following inspector(s):

Inspector Name and Title	Inspector's Employer and Address
Mark Dixon, Lead Groundskeeper	Notre Dame de Namur University 1500 Ralston Avenue, Belmont, CA 94002

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VIII. Certification:

I hereby certify, under penalty of perjury, that the information presented in this report and attachments is true and complete:

Ryan Martini For N.D.N.U.
Signature of Property Owner or Other Responsible Party

Date 1/6/12

RYAN MARTINI
Type or Print Name

NOTRE DAME DE NAMUR UNIVERSITY
Company Name

1500 RALSTON AVENUE, BELMONT, CA 94002
Address

Phone number: 650-508-3640 Email: rmartini@ndnu.edu

Attachment C:

Model Inspection & Maintenance Checklists

Inspection and Maintenance Checklist Vegetated Swale

Property Address: 1500 Ralston Avenue, Belmont, CA 94002

Property Owner: Notre Dame de Namur University

Treatment Measure No.: 1 & 2 Date of Inspection: 12/22/11 Type of Inspection: Pre-rainy season Monthly Quarterly Annual
 Inspector(s): Mark Dixon, Lead Groundskeeper

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Sediment Accumulation on Vegetation	Sediment depth exceeds 2 inches.	N		Sediment deposits on vegetated treatment area of the swale removed. When finished, swale should be level from side to side and drain freely toward outlet. There should be no areas of standing water once inflow has ceased.
Standing Water	When water stands in the swale between storms and does not drain freely.	N		There should be no areas of standing water once inflow has ceased. Any of the following may apply: sediment or trash blockages removed, improved grade from head to foot of swale, removed clogged check dams, added under drains or converted to a wet swale.
Flow spreader (if any)	Flow spreader uneven or clogged so that flows are not uniformly distributed through entire swale width.	N		Spreader leveled and cleaned so that flows are spread evenly over entire swale width.
Constant Baseflow	When small quantities of water continually flow through the swale, even when it has been dry for weeks, and an eroded, muddy channel has formed in the swale bottom.	N		No eroded, muddy channel on the bottom. A low-flow pea-gravel drain may be added the length of the swale.
Poor Vegetation Coverage	When planted vegetation is sparse or bare or eroded patches occur in more than 10% of the swale bottom.	N		Vegetation coverage in more than 90% of the swale bottom. Determine why growth of planted vegetation is poor and correct that condition. Re-plant with plugs of vegetation from the upper slope: plant in the swale bottom at 8-inch intervals, or re-seed into loosened, fertile soil.

DRAFT Vegetated Swale Inspection Checklist

Property Address: 1500 Ralston Ave., Belmont, CA 94002

Date: 1/6/12

Treatment Measure No.: _____

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance is Performed
Vegetation	When the planted vegetation becomes excessively tall; when nuisance weeds and other vegetation start to take over.	N		Vegetation mowed per specifications or maintenance plan, or nuisance vegetation removed so that flow is not impeded. Vegetation should never be mowed lower than the design flow depth. Remove clippings from the swale and dispose appropriately.
Excessive Shading	Growth of planted vegetation is poor because sunlight does not reach swale.	N		Healthy growth of planted vegetation. If possible, trim back over-hanging limbs and remove brushy vegetation on adjacent slopes.
Inlet/Outlet	Inlet/outlet areas clogged with sediment and/or debris.	N		Material removed so that there is no clogging or blockage in the inlet and outlet areas.
Trash and Debris Accumulation	Trash and debris accumulated in the swale.	N		Trash and debris removed from swale.
Erosion/ Scouring	Eroded or scoured swale bottom due to flow channelization, or higher flows.	N		No erosion or scouring in swale bottom. For ruts or bare areas less than 12 inches wide, repair the damaged area by filling with crushed gravel. If bare areas are large, generally greater than 12 inches wide, the swale should be re-graded and re-seeded. For smaller bare areas, overseed when bare spots are evident, or take plugs of grass from the upper slope and plant in the swale bottom at 8-inch intervals.

Inspection and Maintenance Checklist Detention Basin

Property Address: 1500 RALSTON AVENUE, BELMONT, CA 94002 Property Owner: NOTRE DAME DE NAMUR UNIVERSITY

Treatment Measure No.: 1 & 2 Date of Inspection: 12/22/11 Type of Inspection: Pre-rainy season Monthly Quarterly Annual
 Inspector(s): Mark Dixon, Lead Groundskeeper

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
General				
Trash & Debris	<ul style="list-style-type: none"> • Trash and debris accumulated in basin • Visual evidence of dumping 	N		Trash and debris cleared from site.
Poisonous Vegetation and noxious weeds	Poisonous or nuisance vegetation or noxious weeds, e.g., morning glory, English ivy, reed canary grass, Japanese knotweed, purple loosestrife, blackberry, Scotch broom, poison oak, stinging nettles, or devil's club	N		Use Integrated Pest Management techniques to control noxious weeds or invasive species.
Contaminants and Pollution	Any evidence of oil, gasoline, contaminants or other pollutants	N		No contaminants or pollutants present.
Rodent Holes	If facility acts as a dam or berm, any evidence of rodent holes, or any evidence of water piping through dam or berm via rodent holes	N		<p>The design specifications are not compromised by holes.</p> <p>Any rodent control activities are in accordance with applicable laws and do not affect any protected species.</p>

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Insects	Insects such as wasps and hornets interfere with maintenance activities.	N		Insects do not interfere with maintenance activities.
Tree/Brush Growth and Hazard Trees	<ul style="list-style-type: none"> • Growth does not allow maintenance access or interferes with maintenance activity • Dead, diseased, or dying trees 	N		<ul style="list-style-type: none"> • Trees do not hinder maintenance activities. • Remove hazard trees as approved by the City. (Use a certified Arborist to determine health of tree or removal requirements)
Side Slopes				
Erosion	<ul style="list-style-type: none"> • Eroded over 2 in. deep where cause of damage is still present or where there is potential for continued erosion. • Any erosion on a compacted berm embankment. 	N		Cause of erosion is managed appropriately. Side slopes or berm are restored to design specifications, as needed.
Storage Area				
Sediment	Accumulated sediment >10% of designed basin depth or affects inletting or outletting condition of the facility.	N		Sediment cleaned out to designed basin shape and depth; basin reseeded if necessary to control erosion.
Liner (If Applicable)	Liner is visible and has more than three 1/4-inch holes in it.	N		Liner repaired or replaced. Liner is fully covered.
Emergency Overflow/ Spillway and Berms				
Settlement	Berm settlement 4 inches lower than the design elevation.	N		Dike is built back to the design elevation.

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Tree Growth	Tree growth on berms or emergency spillway >4 ft in height or covering more than 10% of spillway.	N		<ul style="list-style-type: none"> Trees should be removed. If root system is small (base less than 4 inches) the root system may be left in place. Otherwise the roots should be removed and the berm restored. A civil engineer should be consulted for proper berm/spillway restoration.
Emergency Overflow/ Spillway	Rock is missing and soil is exposed at top of spillway or outside slope.	N		Rocks and pad depth are restored to design standards.
Debris Barriers (e.g., Trash Racks)				
Trash and Debris	Trash or debris is plugging openings in the barrier.	N		Trash or debris is removed.
Damaged/ Missing Bars	Bars are missing, loose, bent out of shape, or deteriorating due to excessive rust.	N		Bars are repaired or replaced to allow proper functioning of trash rack.
Inlet/Outlet Pipe	Debris barrier is missing or not attached to pipe	N		Debris barrier is repaired or replaced to allow proper functioning of trash rack.
Fencing and Gates				
Missing or broken parts	Any defect in or damage to the fence or gate that permits easy entry to a facility.	N		Fencing and gate are restored to design specifications
Deteriorating Paint or Protective Coating	Part or parts that have a rusting or scaling condition that has affected structural adequacy.	N		Paint or protective coating is sufficient to protect structural adequacy of fence or gate.

Inspection and Maintenance Checklist Any Treatment Measure

Property Address: 1500 RALSTON AVENUE, BELMONT, CA 94002 Property Owner: NOTRE DAME DE NAMUR UNIVERSITY

Treatment Measure No.: 1 & 2 Date of Inspection: 12/22/11 Type of Inspection: Pre-rainy season Monthly Quarterly Annual
 Inspector(s): Mark Dixon, Lead Groundskeeper

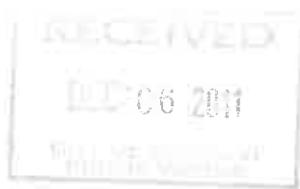
(Nonapplicable fields are shaded out.) Fill in percentages or depth numbers when possible.

Facility Component	Trash/Debris	Erosion/Bank Failure/Channel Formation	Sediment Accumulation	Vegetation	Structural Deficiency (list)	Ponding Water	Pests	Odors	Visible Sheen, etc.	Maintenance Action Taken
Access Road/Structure	0	0								none
Inlet	0	0								none
Facility Structure			0							none
Sedimentation Facility	0	0								none
Treatment Media	0	0								none
Vegetation	0	0								none
Outlet Orifice	0	0								none
Bypass Overflow	0	0								none
Fence, Signs, Valves, etc.	N/A			N/A	N/A		N/A			none

Other Observations _____

**STANDARD TREATMENT MEASURE
OPERATION AND MAINTENANCE (O & M)
INSPECTION REPORT**

Summer Hill Cambridge, LLC



**Stormwater Treatment Measure Operation and Maintenance
Inspection Report to the City of Belmont, California**

This report and attached Inspection and Maintenance Checklists document the inspection and maintenance conducted for the identified stormwater treatment measure(s) subject to the Maintenance Agreement between the City and the property owner during the annual reporting period indicated below.

I. Property Information:

Property Address or APN: 2440 Carlmont Drive

Property Owner: SUMMER HILL CAMBRIDGE, LLC

II. Contact Information:

Name of person to contact regarding this report: SEAN KELLY

Phone number of contact person: (650) 537-2092 Email: SKELLY@GACHINA.COM

Address to which correspondence regarding this report should be directed:

1130 O'BRIEN DRIVE
MENLO PARK, CA 94025

III. Reporting Period:

This report, with the attached completed inspection checklists, documents the inspections and maintenance of the identified treatment measures during the time period from 9/01/11 to 12/01/11.

IV. Stormwater Treatment Measure Information:

The following stormwater treatment measures (identified treatment measures) are located on the property identified above and are subject to the Maintenance Agreement:

Identifying Number of Treatment Measure	Type of Treatment Measure	Location of Treatment Measure on the Property
1	Bio Swale	East of Building 1
2	Bio Swale	East of Building 5

V. Summary of Inspections and Maintenance:

Summarize the following information using the attached Inspection and Maintenance Checklists:

Identifying Number of Treatment Measure	Date of Inspection	Operation and Maintenance Activities Performed and Date(s) Conducted	Additional Comments
1	9/01/2011	NO MAINTENANCE REQUIRED (9/01/2011)	
2	9/01/2011	CUT DOWN GRASS (9/01/2011)	
1	10/05/2011	REPLACED FALLEN ROCKS (10/5/2011)	
2	10/5/2011	NO MAINTENANCE REQUIRED (10/5/2011)	
1	11/08/2011	REMOVED TRASH (11/08/11)	
2	11/08/2011	REMOVED TRASH (11/08/11)	

VI. Sediment Removal:

Total amount of accumulated sediment removed from the stormwater treatment measure(s) during the reporting period: 9 cubic yards.

How was sediment disposed?

- landfill
- other location on-site as described in and allowed by the maintenance plan
- other, explain _____

VII. Inspector Information:

The inspections documented in the attached Inspection and Maintenance Checklists were conducted by the following inspector(s):

Inspector Name and Title	Inspector's Employer and Address

VIII. Certification:

I hereby certify, under penalty of perjury, that the information presented in this report and attachments is true and complete:

 12/2/11
Signature of Property Owner or Other Responsible Party Date

SEAN KELLY
Type or Print Name

GATCHINA LANDSCAPE MANAGEMENT
Company Name

1130 O'BRIEN DRIVE, MENLO PARK, CA. 94025
Address

Phone number (650)537-2052 Email: skelly@gatchina.com

Inspection and Maintenance Checklist Vegetated Swale

Property Address: 2440 Carlmont Drive

Property Owner: SummerHill Cambridge, LLC

Treatment Measure No.: 1 Date of Inspection: 9/01/2014 Type of Inspection: Pre-rainy season Monthly Quarterly Annual

Inspector(s): SEAN KELLY

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Sediment Accumulation on Vegetation	Sediment depth exceeds 2 inches.	N		Sediment deposits on vegetated treatment area of the swale removed. When finished, swale should be level from side to side and drain freely toward outlet. There should be no areas of standing water once inflow has ceased.
Standing Water	When water stands in the swale between storms and does not drain freely.	N		There should be no areas of standing water once inflow has ceased. Any of the following may apply: sediment or trash blockages removed, improved grade from head to foot of swale, removed clogged check dams, added underdrains or converted to a wet swale.
Flow spreader (if any)	Flow spreader uneven or clogged so that flows are not uniformly distributed through entire swale width.	N		Spreader leveled and cleaned so that flows are spread evenly over entire swale width.
Constant Baseflow	When small quantities of water continually flow through the swale, even when it has been dry for weeks, and an eroded, muddy channel has formed in the swale bottom.	N		No eroded, muddy channel on the bottom. A low-flow pea-gravel drain may be added the length of the swale.
Poor Vegetation Coverage	When planted vegetation is sparse or bare or eroded patches occur in more than 10% of the swale bottom.	N		Vegetation coverage in more than 90% of the swale bottom. Determine why growth of planted vegetation is poor and correct that condition. Re-plant with plugs of vegetation from the upper slope: plant in the swale bottom at 8-inch intervals, or re-seed into loosened, fertile soil.

Vegetated Swale Inspection Checklist
 Property Address: 2440 Carlmont Drive

Date: 9/01/2011
 Treatment Measure No.: _____

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Vegetation	When the planted vegetation becomes excessively tall; when nuisance weeds and other vegetation start to take over.	N		Vegetation mowed per specifications or maintenance plan, or nuisance vegetation removed so that flow is not impeded. Vegetation should never be mowed lower than the design flow depth. Remove clippings from the swale and dispose appropriately.
Excessive Shading	Growth of planted vegetation is poor because sunlight does not reach swale.	N		Healthy growth of planted vegetation. If possible, trim back over-hanging limbs and remove brushy vegetation on adjacent slopes.
Inlet/Outlet	Inlet/outlet areas clogged with sediment and/or debris.	N		Material removed so that there is no clogging or blockage in the inlet and outlet areas.
Trash and Debris Accumulation	Trash and debris accumulated in the swale.	N		Trash and debris removed from swale.
Erosion/ Scouring	Eroded or scoured swale bottom due to flow channelization, or higher flows.	N		No erosion or scouring in swale bottom. For ruts or bare areas less than 12 inches wide, repair the damaged area by filling with crushed gravel. If bare areas are large, generally greater than 12 inches wide, the swale should be re-graded and re-seeded. For smaller bare areas, overseed when bare spots are evident, or take plugs of grass from the upper slope and plant in the swale bottom at 8-inch intervals.

Inspection and Maintenance Checklist Vegetated Swale

Property Address: 2440 Carlmont Drive

Property Owner: SummerHill Cambridge, LLC

Treatment Measure No.: 1

Date of Inspection: 10/05/2011

Type of Inspection: Pre-rainy season Monthly Quarterly
 Annual

Inspector(s): SEAN KELLY

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Sediment Accumulation on Vegetation	Sediment depth exceeds 2 inches.	N		Sediment deposits on vegetated treatment area of the swale removed. When finished, swale should be level from side to side and drain freely toward outlet. There should be no areas of standing water once inflow has ceased.
Standing Water	When water stands in the swale between storms and does not drain freely.	N		There should be no areas of standing water once inflow has ceased. Any of the following may apply: sediment or trash blockages removed, improved grade from head to foot of swale, removed clogged check dams, added underdrains or converted to a wet swale.
Flow spreader (if any)	Flow spreader uneven or clogged so that flows are not uniformly distributed through entire swale width.	N		Spreader leveled and cleaned so that flows are spread evenly over entire swale width.
Constant Baseflow	When small quantities of water continually flow through the swale, even when it has been dry for weeks, and an eroded, muddy channel has formed in the swale bottom.	N		No eroded, muddy channel on the bottom. A low-flow pea-gravel drain may be added the length of the swale.
Poor Vegetation Coverage	When planted vegetation is sparse or bare or eroded patches occur in more than 10% of the swale bottom.	N		Vegetation coverage in more than 90% of the swale bottom. Determine why growth of planted vegetation is poor and correct that condition. Re-plant with plugs of vegetation from the upper slope: plant in the swale bottom at 8-inch intervals, or re-seed into loosened, fertile soil.

Vegetated Swale Inspection Checklist
 Property Address: 2440 Carlmont Drive

Date: 10/05/2011
 Treatment Measure No.: 1

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Vegetation	When the planted vegetation becomes excessively tall; when nuisance weeds and other vegetation start to take over.	N		Vegetation mowed per specifications or maintenance plan, or nuisance vegetation removed so that flow is not impeded. Vegetation should never be mowed lower than the design flow depth. Remove clippings from the swale and dispose appropriately.
Excessive Shading	Growth of planted vegetation is poor because sunlight does not reach swale.	N		Healthy growth of planted vegetation. If possible, trim back over-hanging limbs and remove brushy vegetation on adjacent slopes.
Inlet/Outlet	Inlet/outlet areas clogged with sediment and/or debris.	N		Material removed so that there is no clogging or blockage in the inlet and outlet areas.
Trash and Debris Accumulation	Trash and debris accumulated in the swale.	N Y	REPLACE ROCKS THAT FALL INTO SWALE.	Trash and debris removed from swale.
Erosion/ Scouring	Eroded or scoured swale bottom due to flow channelization, or higher flows.	N		No erosion or scouring in swale bottom. For ruts or bare areas less than 12 inches wide, repair the damaged area by filling with crushed gravel. If bare areas are large, generally greater than 12 inches wide, the swale should be re-graded and re-seeded. For smaller bare areas, overseed when bare spots are evident, or take plugs of grass from the upper slope and plant in the swale bottom at 8-inch intervals.

Inspection and Maintenance Checklist Vegetated Swale

Property Address: 2440 Carlmont Drive

Property Owner: SummerHill Cambridge, LLC

Treatment Measure No.: 21

Date of Inspection: 11/09/2011

Type of Inspection: Pre-rainy season Monthly Quarterly Annual

Inspector(s): SEAN KELLY

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance is Performed
Sediment Accumulation on Vegetation	Sediment depth exceeds 2 inches.	N		Sediment deposits on vegetated treatment area of the swale removed. When finished, swale should be level from side to side and drain freely toward outlet. There should be no areas of standing water once inflow has ceased.
Standing Water	When water stands in the swale between storms and does not drain freely.	N		There should be no areas of standing water once inflow has ceased. Any of the following may apply: sediment or trash blockages removed, improved grade from head to foot of swale, removed clogged check dams, added underdrains or converted to a wet swale.
Flow spreader (if any)	Flow spreader uneven or clogged so that flows are not uniformly distributed through entire swale width.	N		Spreader leveled and cleaned so that flows are spread evenly over entire swale width.
Constant Baseflow	When small quantities of water continually flow through the swale, even when it has been dry for weeks, and an eroded, muddy channel has formed in the swale bottom.	N		No eroded, muddy channel on the bottom. A low-flow pea-gravel drain may be added the length of the swale.
Poor Vegetation Coverage	When planted vegetation is sparse or bare or eroded patches occur in more than 10% of the swale bottom.	N		Vegetation coverage in more than 90% of the swale bottom. Determine why growth of planted vegetation is poor and correct that condition. Re-plant with plugs of vegetation from the upper slope; plant in the swale bottom at 8-inch intervals, or re-seed into loosened, fertile soil.

Vegetated Swale Inspection Checklist
 Property Address: 2440 Carlmont Drive

Date: 11/08/2011
 Treatment Measure No.: 1

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance is Performed
Vegetation	When the planted vegetation becomes excessively tall; when nuisance weeds and other vegetation start to take over.	N		Vegetation mowed per specifications or maintenance plan, or nuisance vegetation removed so that flow is not impeded. Vegetation should never be mowed lower than the design flow depth. Remove clippings from the swale and dispose appropriately.
Excessive Shading	Growth of planted vegetation is poor because sunlight does not reach swale.	N		Healthy growth of planted vegetation. If possible, trim back over-hanging limbs and remove brushy vegetation on adjacent slopes.
Inlet/Outlet	Inlet/outlet areas clogged with sediment and/or debris.	N		Material removed so that there is no clogging or blockage in the inlet and outlet areas.
Trash and Debris Accumulation	Trash and debris accumulated in the swale.	Y	REMOVED TRASH IN SWALE	Trash and debris removed from swale.
Erosion/ Scouring	Eroded or scoured swale bottom due to flow channelization, or higher flows.	N		No erosion or scouring in swale bottom. For ruts or bare areas less than 12 inches wide, repair the damaged area by filling with crushed gravel. If bare areas are large, generally greater than 12 inches wide, the swale should be re-graded and re-seeded. For smaller bare areas, overseed when bare spots are evident, or take plugs of grass from the upper slope and plant in the swale bottom at 8-inch intervals.

Inspection and Maintenance Checklist Vegetated Swale

Property Address: 2440 Carlmont Drive

Property Owner: SummerHill Cambridge, LLC

Treatment Measure No.: 2 Date of Inspection: 9/01/2011 Type of Inspection: Pre-rainy season Monthly Quarterly Annual

Inspector(s): SEAN KELLY

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Sediment Accumulation on Vegetation	Sediment depth exceeds 2 inches.	N		Sediment deposits on vegetated treatment area of the swale removed. When finished, swale should be level from side to side and drain freely toward outlet. There should be no areas of standing water once inflow has ceased.
Standing Water	When water stands in the swale between storms and does not drain freely.	N		There should be no areas of standing water once inflow has ceased. Any of the following may apply: sediment or trash blockages removed, improved grade from head to foot of swale, removed clogged check dams, added underdrains or converted to a wet swale.
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Constant Baseflow	When small quantities of water continually flow through the swale, even when it has been dry for weeks, and an eroded, muddy channel has formed in the swale bottom.	N		No eroded, muddy channel on the bottom. A low-flow pea-gravel drain may be added the length of the swale.
Poor Vegetation Coverage	When planted vegetation is sparse or bare or eroded patches occur in more than 10% of the swale bottom.	N		Vegetation coverage in more than 90% of the swale bottom. Determine why growth of planted vegetation is poor and correct that condition. Re-plant with plugs of vegetation from the upper slope; plant in the swale bottom at 8-inch intervals, or re-seed into loosened, fertile soil.

Vegetated Swale Inspection Checklist
 Property Address: 2440 Carlmont Drive

Date: 9/01/2011
 Treatment Measure No.: 2

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
Vegetation	When the planted vegetation becomes excessively tall; when nuisance weeds and other vegetation start to take over.	Y	TRIMMED GRASS DUE TO EXCESSIVE HEIGHT.	Vegetation mowed per specifications or maintenance plan, or nuisance vegetation removed so that flow is not impeded. Vegetation should never be mowed lower than the design flow depth. Remove clippings from the swale and dispose appropriately.
Excessive Shading	Growth of planted vegetation is poor because sunlight does not reach swale.	N		Healthy growth of planted vegetation. If possible, trim back over-hanging limbs and remove brushy vegetation on adjacent slopes.
Inlet/Outlet	Inlet/outlet areas clogged with sediment and/or debris.	N		Material removed so that there is no clogging or blockage in the inlet and outlet areas.
Trash and Debris Accumulation	Trash and debris accumulated in the swale.	N		Trash and debris removed from swale.
Erosion/ Scouring	Eroded or scoured swale bottom due to flow channelization, or higher flows.	N		No erosion or scouring in swale bottom. For ruts or bare areas less than 12 inches wide, repair the damaged area by filling with crushed gravel. If bare areas are large, generally greater than 12 inches wide, the swale should be re-graded and re-seeded. For smaller bare areas, overseed when bare spots are evident, or take plugs of grass from the upper slope and plant in the swale bottom at 8-inch intervals.

Inspection and Maintenance Checklist Vegetated Swale

Property Address: 2440 Carlmont Drive

Property Owner: SummerHill Cambridge, LLC

Treatment Measure No.: 2 Date of Inspection: 10/05/2011 Type of Inspection: Pre-rainy season Monthly Quarterly Annual

Inspector(s): SEAN KELLY

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance is Performed
Sediment Accumulation on Vegetation	Sediment depth exceeds 2 inches.	N		Sediment deposits on vegetated treatment area of the swale removed. When finished, swale should be level from side to side and drain freely toward outlet. There should be no areas of standing water once inflow has ceased.
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Vegetated Swale Inspection Checklist
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 Treatment Measure No.: 2

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Inspection and Maintenance Checklist Vegetated Swale

Property Address: 2440 Carlmont Drive

Property Owner: SummerHill Cambridge, LLC

Treatment Measure No.: 2 Date of Inspection: 11/00/2011 Type of Inspection: Pre-rainy season Monthly Quarterly Annual

Inspector(s): SEAN KELLY

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance Is Performed
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Vegetated Swale Inspection Checklist
 Property Address: 2440 Carlmont Drive

Date: 10/08/2011
 Treatment Measure No.: 2

Defect	Conditions When Maintenance Is Needed	Maintenance Needed? (Y/N)	Comments (Describe maintenance needed and if needed maintenance was not conducted, note when it will be done.)	Results Expected When Maintenance is Performed
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INDUSTRIAL AND COMMERCIAL BUSINESS INSPECTION PLAN CITY OF BELMONT

Date Originally Prepared: June 21, 2010

Date Last Updated: August 5, 2010

BACKGROUND

This industrial and commercial business inspection plan (Inspection Plan) serves as the city's prioritized inspection work plan that the city will implement to comply with the municipal regional stormwater permit's (MRP) Provision C.4.b requirements. This MRP provision requires that an Inspection Plan be developed. The Inspection Plan's attached Prioritized Inspection List of Businesses (Inspection List) must be submitted with the 2010 Annual Report, and an annually updated Inspection List must be submitted with subsequent annual reports.

Municipal staff used the following steps to create this Inspection Plan and comply with the MRP. Steps 1 and 2 address MRP requirements for the Inspection Plan and Step 3 addresses compliance with MRP requirements for creating an Inspection List that is included as an attachment to the Inspection Plan.

Steps

1. Identify a method of establishing priorities for inspections and the frequency of inspections for each category of priority.
2. Describe the method that will be used to identify newly opened businesses that may need inspection.
3. Develop an Inspection List that includes:
 - a. A list of all of the industrial and commercial businesses located within the municipality's jurisdiction that require inspection;
 - b. A determination of the priority for inspection of each business on the Inspection List using the identified method of establishing inspection priorities;
 - c. Identification of businesses on the Inspection List that are scheduled for inspection during the current fiscal year; and
 - d. An annual update or revision of the Inspection List starting in 2011.

Each of these steps was followed to develop this Inspection Plan as described in the following sections.

STEP 1: IDENTIFY A METHOD OF ESTABLISHING PRIORITIES FOR INSPECTIONS AND FREQUENCY OF INSPECTIONS

What the MRP Requires

The MRP requires that each of the businesses to be inspected be assigned a priority for inspection based on "the potential for water quality impact using criteria such as pollutant sources on site, pollutants of concern, proximity to a waterbody, violation history of the facility, and other relevant factors" (Provision C.4.b.ii.(3)). In addition, the MRP requires that appropriate inspection frequencies be established based on the priority for inspection, "potential for contributing pollution to stormwater runoff" and be "commensurate with the threat to water quality" (Provision C.4.b.ii.(5)).

Further, the MRP requires: "A description of the process for prioritizing inspections and frequency of inspections" (Provision C.4.b.i.(2)).

County Inspection Plan- Business List

BELMONT	1301	6TH	BELI DELI
	1000	6TH	CAPRINOS ITALIAN RESTAURANT
	1023	ALAMEDA DE LAS PULGAS	BASKIN ROBBINS ICE CREAM
	1400	ALAMEDA DE LAS PULGAS	CARLMONT HIGH SCHOOL
	1011	ALAMEDA DE LAS PULGAS	CARLMONT VILLAGE CLEANERS
	1003	ALAMEDA DE LAS PULGAS	COYOTE MEXICAN CAFE
	1027	ALAMEDA DE LAS PULGAS	DOCS BAGELS
	1079	ALAMEDA DE LAS PULGAS	GIN MON RESTAURANT
	1015	ALAMEDA DE LAS PULGAS	HOLA MEXICAN RESTAURANT & CANTINA
	1094	ALAMEDA DE LAS PULGAS	JIMMY CAFE
	1085	ALAMEDA DE LAS PULGAS	LUNARDIS MARKET
	1071	ALAMEDA DE LAS PULGAS	STARBUCKS #538
	1010	ALAMEDA DE LAS PULGAS	SUNRISE SENIOR LIVING
	1001	ALAMEDA DE LAS PULGAS	SUSHI KUU
	1017	ALAMEDA DE LAS PULGAS	VILLAGE HOST PIZZA
	815	BELMONT	THE VANS RESTAURANT
	2400	CARLMONT	LESLEY TERRACE
	400	CONCOURSE	HYATT HOUSE
	3	DAIRY	ADMINISTRATION & MAINT YARD
	20	DAVIS	RAISER ORGANIZATION
	2522	DEKOVEN	DEKOVEN PUMP STATION
	864	EL CAMINO REAL	AUSIELLOS
		EL CAMINO REAL	BELMONT CERTIFIED FARMERS MARKET
	1397	EL CAMINO REAL	BELMONT GYROS HOUSE
	564	EL CAMINO REAL	BELMONT TIRES, WHEELS & SERVIC
	1625	EL CAMINO REAL	BLUE SKY CAFE
	1400	EL CAMINO REAL	CAFE MOSSANT
	516	EL CAMINO REAL	DOLLAR TREE STORE #2782
	1501	EL CAMINO REAL	DOMINOS PIZZA
	390	EL CAMINO REAL	EDIBLE ARRANGEMENTS
	1444	EL CAMINO REAL	FIVE STAR AUTO SERVICE CENTER
	1500	EL CAMINO REAL	GODFATHER BURGER LOUNGE
	1504	EL CAMINO REAL	GOOD BITES CAFE
	510	EL CAMINO REAL	IHOP RESTAURANT
	1360	EL CAMINO REAL	IRON GATE
	522	EL CAMINO REAL	MCDONALDS
	390	EL CAMINO REAL	MOUNTAIN MIKES PIZZA
	1602	EL CAMINO REAL	PAPA MURPHYS TAKE N BAKE PIZZA
	1200	EL CAMINO REAL	PEETS COFFEE & TEA
	311	EL CAMINO REAL	PILGRIM KITCHEN BAKERY
	1480	EL CAMINO REAL	QUIZNOS SUB
	1100	EL CAMINO REAL	SAFEWAY INC #1138
	400	EL CAMINO REAL	SEVEN ELEVEN FOOD STORE
	300	EL CAMINO REAL	SHALIZAAR
	1050	EL CAMINO REAL	STARBUCKS COFFEE
	1602	EL CAMINO REAL	SUBWAY 4776
	1428	EL CAMINO REAL	THE LARIAT
	1200	EL CAMINO REAL	TOTOS PIZZERIA AND RESTAURANT
	554	EL CAMINO REAL	U HAUL CENTER OF BELMONT

120	EL CAMINO REAL	WHEEL WORKS
390	EL CAMINO REAL	WHISPERS CAFE & CREPERIE
1260	ELMER	4TH STATE INC
1315	ELMER	AUTOBAHN MOTORS
1305	ELMER	BAY PACIFIC AUTO BODY
1050	ELMER	GREENSTREETS CLEANERS
801	GRANADA	BELMONT REDWOOD SHORES SCHL DIST
2843	HALLMARK	HALLMARK PUMP STATION
425	HARBOR	ADVANCED EDM CONCEPTS
701	HARBOR	AUTO WAY REPAIR CENTER
701	HARBOR	BELMONT KWIK BLVD
700	HARBOR	GERMAN AUTO KRAFT INC
240	HARBOR	LASKY TRADE PRINTING
232	HARBOR	LITTLE BELMONT COFFEE SHOP
555	HARBOR	MOQUIN PRESS
701	HARBOR	OLYMPIAN BELMONT
610	HARBOR	OLYMPIAN CFN
276	HARBOR	PLASMA TECHNOLOGY SYSTEMS
298	HARBOR	POWERSVISION
248	HARBOR	PRECISION POWDER COATING
256	HARBOR	SANDERS AUTOMOTIVE SVC CTR
645	HARBOR	SCHULBA GERMAN BRAKE & LUBE
120	HARBOR	TAQUERIA EL METATE
150	HARBOR	THE NEW HARBOR
601	HARBOR	WESTERN GRINDING SERVICE INC
700	ISLAND	AUTOBAHN MOTORS
301	ISLAND	ISLAND PARK PUMP
401	ISLAND	ORACLE ISLAND PARK CAFE
31	KAREN	BUS & EQUIPMENT REPAIR OF CALI
19	KAREN	GOLDEN STATE SUPPLY
3118	LAUREL CREEK	SAN JUAN STATION
	LAUREL CREEK RD/HASKINS D	CITY OF BELMONT HASKINS PUMP STA
1906	LYON	HERSOM PUMP STATION
517	MARINE VIEW	HELD PAINTING
520	MASONIC	CORIANDER INDIAN CUISINE
550	MASONIC	SUSHI LOVER
539	MOUNTAIN VIEW	ABEL MACHINING
617	MOUNTAIN VIEW	MICATEC INC
610	MOUNTAIN VIEW	QUALITY STRIPING INC
230	OLD COUNTY	AUTO CARE OF REDWOOD SHORES
1140	OLD COUNTY	AUTO SCIENTIFIC
1201	OLD COUNTY	BAR-ONE MANUFACTURING
1438	OLD COUNTY	BARTLETTS AUTO BODY
1060	OLD COUNTY	BEL MATEO AUTO REPAIR INC
815	OLD COUNTY	BELMONT ICELAND
401	OLD COUNTY	BOLAR CEILINGS
1350	OLD COUNTY	CALIFORNIA SHINGLE & SHAKE COM
1250	OLD COUNTY	COLOGNE BELMONT CAR CENTER
748	OLD COUNTY	COUNTY AUTO SVC
150	OLD COUNTY	EUROPEAN & ASIAN AUTO SERVICE
1300	OLD COUNTY	EXTREME AUTO BODY & PAINT

1301	OLD COUNTY	FERNANDO THE NEAT
1297	OLD COUNTY	FINELINE CARPENTRY INC
800	OLD COUNTY	GUNTERS AUTO & TRUCK REPAIR
201	OLD COUNTY	KELLY MOORE PAINTS
1020	OLD COUNTY	KIRBERG MOTORS INC
794	OLD COUNTY	M & G AUTOMOTIVE REPAIR
1150	OLD COUNTY	MARSILI'S BODY SHOP
1160	OLD COUNTY	MARVIN GARDENS
1404	OLD COUNTY	MEGASOLUTIONS
1331	OLD COUNTY	OLD COUNTY DELI
1325	OLD COUNTY	PETERSON PRODUCTS
302	OLD COUNTY	PETES AUTO BODY SHOP INC
940	OLD COUNTY	RICHARDS DRY CLEANERS
1141	OLD COUNTY	SAFETY EQUIPMENT CORP
252	OLD COUNTY	SILVER STAR AUTO BODY
292	OLD COUNTY	SPITERIS AUTO SERVICE
1410	OLD COUNTY	ST JAMES GATE
317	OLD COUNTY	SUMMIT AUTO BODY & PAINTING
844	OLD COUNTY	WOOD SERVICENTER
505	ONEILL	AUTO MASTER BODY SHOP
485	ONEILL	CLARK PEST CONTROL
470	RALSTON	52 ENTERPRISES, INC.
2040	RALSTON	AVANTI PIZZA
995	RALSTON	BELMONT 76 SVC CTR
1500	RALSTON	BON APPETIT @ NDNU
2039	RALSTON	CAFE BLISS
2000	RALSTON	CARLMONT VILLAGE SHELL
2045	RALSTON	CHEVRON USA INC
600	RALSTON	CHINA VILLAGE RESTAURANT
641	RALSTON	CHUCKS DONUTS
575	RALSTON	CLASSIC 101 BURGERS & SHAKES
968	RALSTON	DIVINO
678	RALSTON	GREEN CLEANERS INC
1500	RALSTON	HANIBAL PUMP STATION
880	RALSTON	HOLIDAY CLEANERS OF AMERICA
601	RALSTON	HOLIDAY LIQUORS
945	RALSTON	HONG KONG RESTAURANT
1500	RALSTON	NOTRE DAME DE NAMUR UNIVERSITY
1540	RALSTON	NOTRE DAME HIGH SCHOOL
2100	RALSTON	SAFeway STORE #668
955	RALSTON	SUSHI MONSTER
699	RALSTON	TRAVIS 76 #254519
1920	RALSTON	VIVACE RISTORANTE
900	RALSTON	WALGREEN COMPANY
698	RALSTON	WENDYS RESTAURANT #2104
	RALSTON AVE X: DAVIS	MPWD WEST BELMONT PUMP STATION
110	SEM	BELMONT CORPORATION YARD
1385	SHOREWAY	BELMONT PUMP STATION
1201	SHOREWAY	EMPIRE LUMBER
1101	SHOREWAY	HOBEEES
1355	SHOREWAY	JAMECO ELECTRONICS

1399	SHOREWAY	NIKON PRECISION INC
1335	SHOREWAY	PG&E BELMONT SUBSTATION
1301	SHOREWAY	SHOREWAY CAFE
911	VILLA	LORENZOS SANDWICH SHOP
616	WALTERMIRE	CUSTOM METAL MFG CO

Belmont Inspection Plan- Business List

Business Name	No.	Street Address	Business Type
GUNTERS AUTO AND TRUCK REPAIR	800	OLD COUNTY RD	AUTO REPAIR/BODY SHP
ASTRO GLASS, TINTING & GRAPHICS	1565		AUTO GLASS SHOP
EXPERT AUTO ENGINEERS	3130	E LAUREL CREEK	AUTO PARTS - WHSE
MORGAN TIRE&AUTO DBA WHEEL WORKS	120	EL CAMINO REAL	AUTO PARTS-RETAIL
NAPA AUTO PARTS- BELMONT	415	OLD COUNTY RD	AUTO PARTS-RETAIL
MORGAN TIRE&AUTO DBA WHEEL WORKS	1408	OLD COUNTY RD	AUTO REPAIR SHOP
MUSTANG CITY OF BELMONT	776	OLD COUNTY RD	AUTO REPAIR/BODY SHP
BIG DAVE'S GARAGE	1302	OLD COUNTY RD	AUTO REPAIR-GENERAL
DOUG'S MOBILE MECHANIC	2187	CARLMONT DR 16	AUTO REPAIR-GENERAL
HERITAGE MOTORS LIMITED	1296	OLD COUNTY RD	AUTO REPAIR-GENERAL
JAPAN DIAGNOSTICS	1080	OLD COUNTY RD	AUTO REPAIR-GENERAL
AUTO IMAGE	184	OLD COUNTY RD	AUTOMOTIVE SERVICES
BELMONT SMOG TEST ONLY, LLC	230	OLD COUNTY RD A	AUTO REPAIR-GENERAL
LITHIUMSTART LLC	550	MARINE VIEW AVE D	AUTOMOTIVE SERVICES
Extreme Auto Body	1300	OLD COUNTY RD A	AUTO REPAIR-GENERAL
JEM CONSULTING, LLC	501-J	OLD COUNTY RD	BAKERY PRODUCTS
NATASHA'S SWEET TEMPTATIONS	570	MARINE VIEW AVE E	BAKERY PRODUCTS
OASIS BAKLAVA	1308	OLD COUNTY RD	BAKERY PRODUCTS
PIKAKE COMPANY	501	OLD COUNTY RD G	BAKERY PRODUCTS
CALIFORNIA SHINGLE & SHAKE CO.	1350	OLD COUNTY RD	BUILDING MATERIALS
ECONO-DOORMASTERS	1457	EL CAMINO REAL	BUILDING MATERIALS
AVIS RENT A CAR SYSTEM, LLC	1501	EL CAMINO REAL 201	CAR RENTAL/LEASING
PAMELA KEITH CULINARY COMPANY	200	OLD COUNTY RD	CATERING
ASAHI SUSHI	1100	EL CAMINO REAL	EATING PLACE
CANDIS CATERING	570	MARINE VIEW AVE D	EATING PLACE
ME.N.U.	889	RALSTON AVE	EATING PLACE
MR PICKLES SANDWICH SHOP	891	RALSTON AVE	EATING PLACE
QUIZNOS SUB	1480	EL CAMINO REAL	EATING PLACE
RESTAURANT ON THE HILL, INC	815	BELMONT AVE	EATING PLACE
SUBWAY # 44784	1073	ALAMEDA DE LAS	EATING PLACE
SUBWAY 4776	1602	EL CAMINO REAL	EATING PLACE
THE KITCHEN CO. DBA: LMAGAC	519	MARINE VIEW AVE F	EATING PLACE
YA-UA YOGURT & PASTRIES	1090	ALAMEDA DE LAS	EATING PLACE
BAY POINTE LANDSCAPE	530	OLD COUNTY RD	LANDSCAPING
MILLEFIORI LANDSCAPE DESIGN	824	ALAMEDA DE LAS	LANDSCAPING
BURNETT LANDSCAPE DEVELOPMENT INC	1500	INDUSTRIAL WAY 3	LAWN & GARDEN SERV
PROVEN TOLERANCE SPECIALIST	570	MARINE VIEW AVE C	MACHINE/METAL SHOPS
CHEF JARVIS HANDCRAFTED FOODS	1000	SIXTH AVE	MISC. FOOD STORE
WEST AUTO SALE	830	EL CAMINO REAL	MV DEALERS-NEW/USED
AUTOSTAR	103	EL CAMINO REAL	MV DEALER-USED ONLY
TYLER'S CARLMONT NURSERY	2029	RALSTON AVE	NURSERIES&GARDEN- RTL
CHRIS'S PAINTING CO	1221	GRANADA ST	PAINTING
KAZAKOFF'S INC	6	PARKRIDGE CT	PAINTING
MARIO'S PAINTING	814	RUTH AVE	PAINTING
Summit Auto Body	317	Old County Rd	AUTO BODY
Pete's Auto Body	302	Old County Rd	AUTO BODY

Description of Prioritization Process and Assignment of Inspection Frequencies to Different Priorities

- ➔ Businesses meeting the following criteria generally have been assigned as having a high priority for inspection:
 1. Businesses that are subject to the State General NPDES Permit for Stormwater Discharges Associated with Industrial Activity.
 2. Retail food facilities, hazardous materials users, automotive service facilities, and hazardous waste generators that have a history of using inadequate best management practices.
 3. Businesses that have had a non-stormwater discharge disallowed by the MRP during the previous fiscal year.All other businesses have generally been assigned as having a low priority for inspection.

- ➔ High priority for inspection means that the business will typically be inspected annually. Low priority for inspection means that the business will be inspected less frequently than annually, such as every other year or every third year.¹.

STEP 2: DESCRIBE METHOD THAT WILL BE USED TO IDENTIFY NEW BUSINESSES

What the MRP Requires

The MRP requires that the Inspection Plan have a “mechanism to include newly opened businesses that warrant inspection ...” (Provision C.4.b.i.(2)).

Description of Method for Identifying New Businesses

- ➔ The following describes how new businesses that may warrant an inspection are identified so that they will be included on the Inspection List. [*Describe below how your municipality identifies new businesses and decides whether they warrant inspection*].
 - Application for a new construction/new business is submitted to the City’s Planning Department;
 - The project goes through the Planning review followed by Building and Public Works Departments review;
 - Application for a Business License is received.
 - County Environmental Health receives a notice of the new business and determines the frequency of the inspection needed for it.

STEP 3: DEVELOP AN INSPECTION LIST

This step includes the following four substeps associated with the development and maintenance of the Inspection List:

- a. Develop a list of all of the industrial and commercial businesses that require inspection;
- b. Determine the priority for inspection of each business on the Inspection List;
- c. Identify businesses on the Inspection List that are scheduled for inspection during the current fiscal year; and
- d. Prepare an annual update or revision of the Inspection List starting in 2011.

¹ The municipality may define other categories of priority and their associated inspection frequency. Most municipalities have previously used two categories of frequency for inspection and this approach has been retained in this template.

What the MRP Requires

Develop a List of All Businesses Requiring Inspection

The MRP requires that the Inspection Plan be used to maintain an Inspection List of industrial and commercial businesses “that could reasonably be considered to cause or contribute to pollution of stormwater runoff” (Provision C.4.b.ii).

In particular, the MRP lists the following types of businesses as needing to be inspected if they “have a reasonable likelihood to be sources of pollutants to stormwater and non-stormwater discharges:” (Provision C.4.b.ii(2))

- 1) Industrial facilities², as defined in 40 CFR 122.26(b)(14), including those subject to the State General NPDES Permit for Stormwater Discharges Associated with Industrial Activity;
- 2) Vehicle salvage yards;
- 3) Metal and other recycled material collection facilities, waste transfer facilities;
- 4) Vehicle mechanical repair, maintenance, fueling, or cleaning;
- 5) Building trades central facilities or yards, corporation yards, nurseries, and greenhouses;
- 6) Building material retailers and storage;
- 7) Plastic manufacturers; and
- 8) Other facilities designated by the city or Water Board as having a reasonable potential to contribute to pollution of stormwater runoff. The Water Board staff places a priority on inspecting retail food facilities, and these businesses should be included in the Inspection List if they “have a reasonable likelihood to be sources of pollutants to stormwater and non-stormwater discharges.”

In addition, the MRP lists the following functional aspects of businesses that may produce pollutants when exposed to stormwater as part of the criteria for developing the Inspection List:

- 1) Outdoor process and manufacturing areas;
- 2) Outdoor material storage areas;
- 3) Outdoor waste storage and disposal areas;
- 4) Outdoor vehicle and equipment storage and maintenance areas;
- 5) Outdoor wash areas;
- 6) Outdoor drainage from indoor areas;
- 7) Rooftop equipment; and
- 8) Other sources determined by the city or Water Board to have a reasonable potential to contribute to pollution of stormwater runoff.

Establish Inspection Priority for Businesses on the Inspection List

The MRP requires that businesses that have a reasonable potential to pollute stormwater runoff be prioritized using factors listed in the MRP (Provision C.4.b.ii.(3)).

Identify Businesses Scheduled for Inspection During the Current Fiscal Year

The MRP requires that the annual report include “the list of facilities scheduled for inspection during the current fiscal year” (Provision C.4.b.iii.(2)).

Annual Updates

² The MRP appears to use the terms “facilities” and “businesses” interchangeably. This template generally uses the term business since that is used in the title of Provision C.4.b., and it is the term most inspectors use.

The MRP requires that the Inspection List be annually updated and maintained (Provision C.4.b.ii). The annual updates should include new businesses; any needed modifications to inspection priorities based on recent inspections, illicit discharge notifications, or other relevant factors; and removal of businesses that are no longer operating. In addition, updates or revisions to the Inspection List need to be included in annual reports starting in 2011 (Provision C.4.b.iii.(1)).

Substep 3a: Develop Inspection List

→ See Attachment A.

Substep 3b: Determine Priority for Businesses

→ See Attachment A.

Substep 3c: Identify Businesses Scheduled for Inspection in the Current Fiscal Year

→ See Attachment B.

Substep 3d: Annual Update

→ *[Starting with the 2011 annual report and annually thereafter, make any needed revisions to the attached Inspection List. Update the Inspection List with information that indicates which of the businesses listed will be inspected during the current fiscal year. Include revisions or updates to the Inspection List in each annual report.]*

**Attachment A
Prioritized Inspection List of Businesses (Inspection List)**

Date Originally Prepared: _____

Date Last Updated³: _____

High Priority Businesses for Inspection⁴ Are Inspected Annually [*Tailor priority categories and inspection frequencies as needed*].

Name of Business	Address	Type of Business	Has Industrial General Permit Coverage?	Comments	Scheduled for Inspection in FY 2010/11 ⁵

Total number of businesses _____

Low Priority Businesses for Inspection² Are Inspected Less Frequently Than Once a Year

Name of Business	Address	Type of Business	Has Industrial General Permit Coverage?	Comments	Scheduled for Inspection in FY 2010/11 ⁵

Total number of businesses _____

Grand total number of businesses on the Inspection List _____

³ The municipal regional stormwater permit requires an annual update of businesses to inspect.

⁴ The frequency of inspections is a goal that should be met for most businesses. A particular business or facility's inspection priority may be modified based on more recent information during the annual Inspection List update, and businesses and facilities may be added and deleted from the Inspection List consistent with the MRP.

⁵ A check mark in this column means that a business is scheduled for inspection in the current fiscal year. This column should be updated annually and updates or revisions to the Inspection List are required in each annual report.

Business Name	No.	Street Address	Business Type	Inspect. Date	Inspection Type					Enforcement	Comments
					1st	2nd	New Facility	Complaint	Follow up		
ASTRO GLASS, TINTING & GRAPHICS	1565		AUTO GLASS SHOP		1st	2nd	New Facility	Complaint	Follow up		
EXPERT AUTO ENGINEERS	3130	E LAUREL CREEK	AUTO PARTS - WHSE		1st	2nd	New Facility	Complaint	Follow up		
MUSTANG CITY OF BELMONT	776	OLD COUNTY RD	AUTO REPAIR/BODY SHP		1st	2nd	New Facility	Complaint	Follow up		
LITHIUMSTART LLC	550	MARINE VIEW AVE D	AUTOMOTIVE SERVICES		1st	2nd	New Facility	Complaint	Follow up		
JEM CONSULTING, LLC	501-J	OLD COUNTY RD	BAKERY PRODUCTS		1st	2nd	New Facility	Complaint	Follow up		
NATASHA'S SWEET TEMPTATIONS	570	MARINE VIEW AVE E	BAKERY PRODUCTS		1st	2nd	New Facility	Complaint	Follow up		
PIKAKE COMPANY	501	OLD COUNTY RD G	BAKERY PRODUCTS		1st	2nd	New Facility	Complaint	Follow up		
CALIFORNIA SHINGLE & SHAKE CO.	1350	OLD COUNTY RD	BUILDING MATERIALS		1st	2nd	New Facility	Complaint	Follow up		
ECONO-DOORMASTERS	1457	EL CAMINO REAL	BUILDING MATERIALS		1st	2nd	New Facility	Complaint	Follow up		
PAMELA KEITH CULINARY COMPANY	200	OLD COUNTY RD	CATERING		1st	2nd	New Facility	Complaint	Follow up		
ASAHI SUSHI	1100	EL CAMINO REAL	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
CANDIS CATERING	570	MARINE VIEW AVE D	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
YUME SUSHI	889	RALSTON AVE	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
MR PICKLES SANDWICH SHOP	891	RALSTON AVE	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
QUIZNOS SUB	1480	EL CAMINO REAL	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
RESTAURANT ON THE HILL, INC	815	BELMONT AVE	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
SUBWAY # 44784	1073	ALAMEDA DE LAS PULGAS	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
SUBWAY 4776	1602	EL CAMINO REAL	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
THE KITCHEN CO. DBA: LMAGAC	519	MARINE VIEW AVE F	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
YA-UA YOGURT & PASTRIES	1090	ALAMEDA DE LAS PULGAS	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up		
BURNETT LANDSCAPE DEVELOPMENT INC	1500	INDUSTRIAL WAY 3	LAWN & GARDEN SERV		1st	2nd	New Facility	Complaint	Follow up		
CHEF JARVIS HANDCRAFTED FOODS	1000	SIXTH AVE	MISC. FOOD STORE		1st	2nd	New Facility	Complaint	Follow up		
WEST AUTO SALE	830	EL CAMINO REAL	MV DEALERS-NEW/USED		1st	2nd	New Facility	Complaint	Follow up		
AUTOSTAR	103	EL CAMINO REAL	MV DEALER-USED ONLY		1st	2nd	New Facility	Complaint	Follow up		
Tyler's Carlmont Nursery	2029	Ralston Ave	NURSERY & GARDEN-RETAIL		1st	2nd	New Facility	Complaint	Follow up		
CHRIS'S PAINTING CO	1221	GRANADA ST	PAINTING		1st	2nd	New Facility	Complaint	Follow up		

KAZAKOFF'S INC	6	PARKRIDGE CT	PAINING		1st	2nd	New Facility	Complaint	Follow up		
MARIO'S PAINTING	814	RUTH AVE	PAINING		1st	2nd	New Facility	Complaint	Follow up		

Business total	28
Business Inspections conducted	

Proposed Stormwater Inpsection List
 7/01/2011 to 6/30/2012

FACILITY	ADDRESS	CITY	Record ID	Code	Staff
BASKIN ROBBINS ICE CREAM	1023 ALAMEDA DE LAS PULGAS	BELMONT	PR0041576	1	JOAN N
CARLMONT VILLAGE CLEANERS	1011 ALAMEDA DE LAS PULGAS	BELMONT	PR0040317	1	ROBERT
COYOTE MEXICAN CAFE	1003 ALAMEDA DE LAS PULGAS	BELMONT	PR0042441	1	JOAN N
STARBUCKS #538	1071 ALAMEDA DE LAS PULGAS	BELMONT	PR0041598	1	JOAN N
VILLAGE HOST PIZZA	1017 ALAMEDA DE LAS PULGAS	BELMONT	PR0041544	1	JOAN N
LESLEY TERRACE	2400 CARLMONT	BELMONT	PR0052142	1	JOAN N
CAFE MOSSANT	1400 EL CAMINO REAL	BELMONT	PR0041597	1	JOAN N
CHEZ SAIGON	1316 EL CAMINO REAL	BELMONT	PR0053681	1	JOAN N
DOLLAR TREE STORE #2782	516 EL CAMINO REAL	BELMONT	PR0047449	1	JOAN N
DREAM DINNERS	390 EL CAMINO REAL	BELMONT	PR0050186	1	JOAN N
EDIBLE ARRANGEMENTS	390 EL CAMINO REAL	BELMONT	PR0050653	1	JOAN N
GODFATHER'S BURGER LOUNGE	1500 EL CAMINO REAL	BELMONT	PR0041586	1	JOAN N
GOOD BITES CAFE	1504 EL CAMINO REAL	BELMONT	PR0041624	1	JOAN N
IHOP RESTAURANT	510 EL CAMINO REAL	BELMONT	PR0041551	1	JOAN N
MCDONALDS	522 EL CAMINO REAL	BELMONT	PR0041552	1	JOAN N
MOUNTAIN MIKES PIZZA	390 EL CAMINO REAL	BELMONT	PR0041581	1	JOAN N
PAPA MURPHYS TAKE N BAKE PIZZA	1602 EL CAMINO REAL	BELMONT	PR0041590	1	JOAN N
PEETS COFFEE & TEA	1200 EL CAMINO REAL	BELMONT	PR0041612	1	EUFRESINA
SAFEWAY INC #1138	1100 EL CAMINO REAL	BELMONT	PR0041605	1	JOAN N
SHALIZAAR	300 EL CAMINO REAL	BELMONT	PR0053752	1	JOAN N
STARBUCKS COFFEE	1050-A EL CAMINO REAL	BELMONT	PR0041617	1	EUFRESINA
WHISPERS CAFE & CREPERIE	390 EL CAMINO REAL	BELMONT	PR0049773	1	JOAN N
4TH STATE INC	1260 ELMER	BELMONT	PR0039117	1	ROBERT
GREENSTREETS CLEANERS	1050 ELMER	BELMONT	PR0053757	1	ROBERT
ADVANCED EDM CONCEPTS	425 HARBOR	BELMONT	PR0048750	1	ROBERT
MOQUIN PRESS	555 HARBOR	BELMONT	PR0039178	1	ROBERT
OLYMPIAN BELMONT	701 HARBOR	BELMONT	PR0040289	1	ROBERT
PRECISION POWDER COATING	248 HARBOR	BELMONT	PR0057673	1	ROBERT
SCHULBA GERMAN BRAKE & LUBE	645 HARBOR	BELMONT	PR0039156	1	ROBERT
ORACLE ISLAND PARK CAFE	401 ISLAND	BELMONT	PR0042321	1	JOAN N
AUTO CARE OF REDWOOD SHORES	230 OLD COUNTY	BELMONT	PR0048532	1	ROBERT
BEL MATEO AUTO REPAIR INC	1060 OLD COUNTY	BELMONT	PR0047601	1	ROBERT
CALIFORNIA SHINGLE & SHAKE COM	1350 OLD COUNTY	BELMONT	PR0040302	1	ROBERT
COLOGNE BELMONT CAR CENTER	1250 OLD COUNTY	BELMONT	PR0040329	1	ROBERT
COUNTY AUTO SVC	748 OLD COUNTY	BELMONT	PR0040327	1	ROBERT
EXTREME AUTO BODY & PAINT	1300 OLD COUNTY	BELMONT	PR0043253	1	ROBERT
KELLY MOORE PAINTS	201 OLD COUNTY	BELMONT	PR0049856	1	ROBERT
KIRBERG MOTORS INC	1020 OLD COUNTY	BELMONT	PR0040325	1	ROBERT
M & G AUTOMOTIVE REPAIR	794 OLD COUNTY	BELMONT	PR0040313	1	ROBERT
MARVIN GARDENS	1160 OLD COUNTY	BELMONT	PR0041559	1	JOAN N
NOB HILL CATERING	407 OLD COUNTY	BELMONT	PR0049926	1	JOAN N
PETERSON PRODUCTS	1325 OLD COUNTY	BELMONT	PR0039184	1	ROBERT
PETES AUTO BODY SHOP INC	302 OLD COUNTY	BELMONT	PR0040356	1	ROBERT
RICHARDS DRY CLEANERS	940 OLD COUNTY	BELMONT	PR0040312	1	ROBERT
SILVER STAR AUTO BODY	252 OLD COUNTY	BELMONT	PR0040307	1	ROBERT
SPITERIS AUTO SERVICE	292 OLD COUNTY	BELMONT	PR0040333	1	ROBERT
SUMMIT AUTO BODY & PAINTING	317 OLD COUNTY	BELMONT	PR0040285	1	ROBERT
CLARK PEST CONTROL	485 ONEILL	BELMONT	PR0052228	1	ROBERT
52 ENTERPRISES, INC.	470 RALSTON	BELMONT	PR0040290	1	ROBERT

Proposed Stormwater Inspection List
 7/01/2011 to 6/30/2012

AVANTI PIZZA	2040 RALSTON	BELMONT	PR0041600	1	JOAN N
BELMONT 76 SVC CTR	995 RALSTON	BELMONT	PR0040287	1	ROBERT
BON APPETIT @ NDNU	1500 RALSTON	BELMONT	PR0041585	1	JOAN N
CHUCKS DONUTS	641 RALSTON	BELMONT	PR0041568	1	JOAN N
CLASSIC 101 BURGERS & SHAKES	575 RALSTON	BELMONT	PR0041561	1	JOAN N
DRYCLEAN CITY	2040 RALSTON	BELMONT	PR0040291	1	ROBERT
HOLIDAY CLEANERS OF AMERICA	880 RALSTON	BELMONT	PR0040340	1	ROBERT
HOLIDAY LIQUORS	601 RALSTON	BELMONT	PR0041563	1	JOAN N
NOTRE DAME DE NAMUR UNIVERSITY	1500 RALSTON	BELMONT	PR0040283	1	ROBERT
NOTRE DAME HIGH SCHOOL	1540 RALSTON	BELMONT	PR0040308	1	ROBERT
VIVACE RISTORANTE	1920 RALSTON	BELMONT	PR0041565	1	JOAN N
	900 RALSTON	BELMONT	PR0043756	1	ROBERT
WENDYS RESTAURANT #2104	698 RALSTON	BELMONT	PR0041569	1	JOAN N
BELMONT CORPORATION YARD	110 SEM	BELMONT	PR0040300	1	ROBERT
HOBEEES	1101 SHOREWAY	BELMONT	PR0041607	1	JOAN N

City of Belmont Facility Inspections C.4.c.iii (1)

Business Name	No.	Street Address	Business Type	Inspect. Date	Inspection Type						Enforcement	Comments
					X	1st	2nd	New Facility	Complaint	Follow-up		
Auto Care of Redwood Shores	230	Old County Rd	Automotive Svc	11/30/2011	X	1st	2nd	New Facility	Complaint	Follow-up	None/in compliance	Shop could be cleaner, but passable. Floor is draining into sscb, but can easily get into street.
K & K Auto Source	1296	Old County Rd	Automotive Svc	6/08/2011	X	1st	2nd	New Facility	Complaint	Follow up	Verbal Notice	No double containment for oil/waste fluids.
Silver Star Auto Body	252	Old County Rd	Automotive Svc	11/30/2012	X	1st	2nd	New Facility	Complaint	Follow-up	Verbal Notice	Good shop, just needed to educate new employee and refresh others that washing into the street is not allowed.
European Asian Auto Services	150	Old County Rd	Automotive Svc	9/04/2012	X	1st	2nd	New Facility	Complaint	Follow up	None/in compliance	
5 Star Automotive	1444	El Camino Real	Automotive Svc	4/5/2012	X	1st	2nd	New Facility	Complaint	Follow-up	None/in compliance	Shop is clean
GUNTERS AUTO AND TRUCK REPAIR	800	OLD COUNTY RD	AUTO REPAIR/BODY SHP			1st	2nd	New Facility	Complaint	Follow up		
ASTRO GLASS, TINTING & GRAPHICS	1565		AUTO GLASS SHOP			1st	2nd	New Facility	Complaint	Follow up		
EXPERT AUTO ENGINEERS	3130	E LAUREL CREEK	AUTO PARTS - WHSE			1st	2nd	New Facility	Complaint	Follow up		
MORGAN TIRE&AUTO DBA WHEEL WORKS	120	EL CAMINO REAL	AUTO PARTS-RETAIL			1st	2nd	New Facility	Complaint	Follow up		
NAPA AUTO PARTS- BELMONT	415	OLD COUNTY RD	AUTO PARTS-RETAIL			1st	2nd	New Facility	Complaint	Follow up		
MORGAN TIRE&AUTO DBA WHEEL WORKS	1408	OLD COUNTY RD	AUTO REPAIR SHOP			1st	2nd	New Facility	Complaint	Follow up		
MUSTANG CITY OF BELMONT	776	OLD COUNTY RD	AUTO REPAIR/BODY SHP			1st	2nd	New Facility	Complaint	Follow up		
BIG DAVE'S GARAGE	1302	OLD COUNTY RD	AUTO REPAIR-GENERAL			1st	2nd	New Facility	Complaint	Follow up	7/16/2011	
DOUG'S MOBILE MECHANIC	2187	CARLMONT DR 16	AUTO REPAIR-GENERAL			1st	2nd	New Facility	Complaint	Follow up		
HERITAGE MOTORS LIMITED	1296	OLD COUNTY RD	AUTO REPAIR-GENERAL			1st	2nd	New Facility	Complaint	Follow up		
JAPAN DIAGNOSTICS	1080	OLD COUNTY RD	AUTO REPAIR-GENERAL			1st	2nd	New Facility	Complaint	Follow up		
AUTO IMAGE	184	OLD COUNTY RD	AUTOMOTIVE SERVICES	4/9/2012	X	1st	2nd	New Facility	Complaint	Follow up	None/in compliance	
BELMONT SMOG TEST ONLY, LLC	230	OLD COUNTY RD A	AUTO REPAIR-GENERAL			1st	2nd	New Facility	Complaint	Follow up		
LITHIUMSTART LLC	550	MARINE VIEW AVE D	AUTOMOTIVE SERVICES			1st	2nd	New Facility	Complaint	Follow up		
Extreme Auto Body	1300	OLD COUNTY RD A	AUTO REPAIR-GENERAL			1st	2nd	New Facility	Complaint	Follow up		
JEM CONSULTING, LLC	501-J	OLD COUNTY RD	BAKERY PRODUCTS			1st	2nd	New Facility	Complaint	Follow up		
NATASHA'S SWEET TEMPTATIONS	570	MARINE VIEW AVE E	BAKERY PRODUCTS			1st	2nd	New Facility	Complaint	Follow up		
OASIS BAKLAVA	1308	OLD COUNTY RD	BAKERY PRODUCTS			1st	2nd	New Facility	Complaint	Follow up		
	501	OLD COUNTY RD G	BAKERY PRODUCTS			1st	2nd	New Facility	Complaint	Follow up		

PIKAKE COMPANY												
CALIFORNIA SHINGLE & SHAKE CO.	1350	OLD COUNTY RD	BUILDING MATERIALS		1st	2nd	New Facility	Complaint	Follow up			
ECONO-DOORMASTERS	1457	EL CAMINO REAL	BUILDING MATERIALS		1st	2nd	New Facility	Complaint	Follow up			
AVIS RENT A CAR SYSTEM, LLC	1501	EL CAMINO REAL 201	CAR RENTAL/LEASING		1st	2nd	New Facility	Complaint	Follow up			
PAMELA KEITH CULINARY COMPANY	200	OLD COUNTY RD	CATERING		1st	2nd	New Facility	Complaint	Follow up			
ASAHI SUSHI	1100	EL CAMINO REAL	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
CANDIS CATERING	570	MARINE VIEW AVE D	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
ME.N.U.	889	RALSTON AVE	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
MR PICKLES SANDWICH SHOP	891	RALSTON AVE	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
QUIZNOS SUB	1480	EL CAMINO REAL	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
RESTAURANT ON THE HILL, INC	815	BELMONT AVE	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
SUBWAY # 44784	1073	ALAMEDA DE LAS PULGAS	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
SUBWAY 4776	1602	EL CAMINO REAL	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
THE KITCHEN CO. DBA: LMAGAC	519	MARINE VIEW AVE F	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
YA-UA YOGURT & PASTRIES	1090	ALAMEDA DE LAS PULGAS	EATING PLACE		1st	2nd	New Facility	Complaint	Follow up			
BAY POINTE LANDSCAPE	530	OLD COUNTY RD	LANDSCAPING		1st	2nd	New Facility	Complaint	Follow up			
MILLEFIORI LANDSCAPE DESIGN	824	ALAMEDA DE LAS PULGAS	LANDSCAPING		1st	2nd	New Facility	Complaint	Follow up			
BURNETT LANDSCAPE DEVELOPMENT INC	1500	INDUSTRIAL WAY 3	LAWN & GARDEN SERV		1st	2nd	New Facility	Complaint	Follow up			
PROVEN TOLERANCE SPECIALIST	570	MARINE VIEW AVE C	MACHINE/METAL SHOPS		1st	2nd	New Facility	Complaint	Follow up			
CHEF JARVIS HANDCRAFTED FOODS	1000	SIXTH AVE	MISC. FOOD STORE		1st	2nd	New Facility	Complaint	Follow up			
WEST AUTO SALE	830	EL CAMINO REAL	MV DEALERS-NEW/USED		1st	2nd	New Facility	Complaint	Follow up			
AUTOSTAR	103	EL CAMINO REAL	MV DEALER-USED ONLY		1st	2nd	New Facility	Complaint	Follow up			
TYLER'S CARLMONT			NURSERIES&GARDEN- RTL		1st	2nd	New Facility	Complaint	Follow up			
					1st	2nd	New Facility	Complaint	Follow up			
					1st	2nd	New Facility	Complaint	Follow up			
					1st	2nd	New Facility	Complaint	Follow up			

NURSERY	2029	RALSTON AVE												
CHRIS'S PAINTING CO	1221	GRANADA ST	PAINTING			1st	2nd	New Facility	Complaint	Follow up				
KAZAKOFF'S INC	6	PARKRIDGE CT	PAINTING			1st	2nd	New Facility	Complaint	Follow up				
MARIO'S PAINTING	814	RUTH AVE	PAINTING			1st	2nd	New Facility	Complaint	Follow up				
Exhaust Works	425-6	Old County Rd	AUTO REPAIR/BODY SHP	5/07/2012	X	1st	2nd	New Facility	Complaint	Follow up	None/in compliance	No oil or liquids used. Need to be swept up and general clean/pickup. Says that it will be done soon. No NPDES threat.		
Wheel works	120	El Camino Real	AUTO BODY	5/07/2012	X	1st	2nd	New Facility	Complaint	Follow up	None/in compliance	told to cover tires when it rains (mosquitos)		
Summit Auto Body	317	Old County Rd	AUTO BODY			1st	2nd	New Facility	Complaint	Follow up				
Pete's Auto Body	302	Old County Rd	AUTO BODY			1st	2nd	New Facility	Complaint	Follow up				

Business total	53
Business Inspections conducted	8

COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: 4/9/12 1a. Current weather conditions: clear
 2. Facility Name: Auto Image
 3. Site Address: 1888 PCR
 3. Contact Name: Jeff Tom Phone: 631-0559

4. Inspection Type: First Inspection Second Inspection New Facility Complaint Follow up
5. Permit Type: None Air Quality Fire Dept. (Storage) Underground Tanks
 Other _____ Hazmat Bus. Plan Hazardous waste AboveGround Tanks
6. Is the facility covered under a storm water permit? YES / NO Does not need coverage Individual NPDES
 WDID #: _____ NOI Filed SWPPP Required SWPPP on site? YES / NO
7. High Priority Site (significant threat to water quality)? YES / NO Explain _____
8. Facility Type: Automotive Services Gas Station USEPA Phase 1
 Food Service Grading Landscaping
 Commercial Other _____

9. Enforcement/Follow-Up	Date problem first identified:	Next follow-up inspection date:
Comments: _____	_____	_____

Enforcement: <input checked="" type="checkbox"/> None/In Compliance <input type="checkbox"/> Verbal Notice <input type="checkbox"/> Notice to Comply <input type="checkbox"/> Notice of Violation		
<input type="checkbox"/> Stop Work <input type="checkbox"/> Administrative Fine		

10. Resolution: <input type="checkbox"/> Problem Fixed <input type="checkbox"/> Need More Time (include rationale in comments) <input type="checkbox"/> Escalate Enforcement
<input type="checkbox"/> Date resolved: _____
Comments: _____

11. Inspector's Signature: [Signature] Date: 4/9/12

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
MINIMUM BMP'S REQUIRED AND APPLICABLE TO ALL FACILITIES	No evidence of oil and grease or oil and grease residue onto a parking lot, street or adjacent catch basin.				X	
	Equipment kept clean, build up of oil and grease avoided. General good housekeeping. Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			X		
	Spill prevention and control procedures in place. Drip pans or containers available where needed. Adsorbent and cleaning materials on hand for use.			X		
	Soil erosion control BMP's in place				X	
	Employee training program on storm water issues and HazMat. Is aware of the prohibition on discharging of non storm water to the storm drain			X		
	No illicit discharges, such as discharges of wash water from facility, floor mats, floors, porches, parking lots, alleys, sidewalks and street areas (in the immediate vicinity of the establishment), filters or garbage/trash containers.			X		
	Regular cleaning of storm drainage system				X	
	Outdoor storage area covered with fixed roof or temporary cover to prevent contact of pollutants with rainfall and runoff. Impervious surface				X	
	Routinely checks outdoor waste receptacle and ensures that only watertight waste receptacles are used and that lids are closed				X	
	Storm water runoff routed around operating, processing fueling, cleaning and storage areas				X	
	Recycle greases, used oil, oil filters, antifreeze, cleaning solutions, automotive batteries, hydraulic and trans. fluids.				X	
	Waste storage/pretreatment areas clean and free of spill or leaks.				X	
	Removes food waste, rubbish or other materials from parking lot areas in a sanitary manner that does not create a nuisance or discharge to the storm drain.			X		
	Proper disposal of air conditioning, cooling tower and condensate drains			X		
VEHICLE/EQUIPMENT FUELING	Fueling area design minimizes storm water exposure.					
	Covered fueling area					
	Perimeter drain or pavement sloped to containment sump					
	UST equipped with spill and overfill protection, permit					
	Above ground tanks within spill containment					

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

VEHICLE AND EQUIPMENT WASHING/CLEANING	Use off-site commercial washing and cleaning businesses.					
	Covered designated wash area to sewer/landscape					
	Exposed designated wash area to sewer/landscape					
	Covered designated wash area to containment sump					
	Exposed designated wash area to containment sump					
	Water recirculation/reclamation system used					
	Portable containment and vacuum collection of wastewater					
	On-site washing by vendor, wastewater disposal off-site					
	On-site washing by vendor, wastewater collected and disposal on-site, sewer/ landscape					

NOTES:

COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: 4/9/12 1a. Current weather conditions: Clear
2. Facility Name: European Asian Auto Services
3. Site Address: 150 DLR
3. Contact Name: Nick Bagoje Phone: 592-8057

- 4. Inspection Type: [X] First Inspection [] Second Inspection [] New Facility [] Complaint [] Follow up
5. Permit Type: [] None [] Air Quality [] Fire Dept. (Storage) [] Underground Tanks
[] Other [] Hazmat Bus. Plan [X] Hazardous waste [] AboveGround Tanks
6. Is the facility covered under a storm water permit? YES / NO [] Does not need coverage [] Individual NPDES
WDID #: [] NOI Filed [] SWPPP Required SWPPP on site? YES / NO
7. High Priority Site (significant threat to water quality)? YES / NO Explain
8. Facility Type: [X] Automotive Services [] Gas Station [] USEPA Phase 1
[] Food Service [] Grading [] Landscaping
[] Commercial Other

9. Enforcement/Follow-Up
Date problem first identified:
Next follow-up inspection date:
Comments:
Enforcement: [X] None/In Compliance [] Verbal Notice [] Notice to Comply [] Notice of Violation
[] Stop Work [] Administrative Fine

10. Resolution: [] Problem Fixed [] Need More Time (include rationale in comments) [] Escalate Enforcement
[] Date resolved:
Comments:

11. Inspector's Signature: [Signature] Date: 4/9/12

	ACTIVITIES ASSESSMENT CHECKLIST	BMP Effectiveness				COMMENTS
		N	P	A	N/A	
MINIMUM BMP'S REQUIRED AND APPLICABLE TO ALL FACILITIES	No evidence of oil and grease or oil and grease residue onto a parking lot, street or adjacent catch basin.			X		
	Equipment kept clean, build up of oil and grease avoided. General good housekeeping. Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			X		
	Spill prevention and control procedures in place. Drip pans or containers available where needed. Adsorbent and cleaning materials on hand for use.			X		
	Soil erosion control BMP's in place				X	
	Employee training program on storm water issues and HazMat. Is aware of the prohibition on discharging of non storm water to the storm drain				X	
	No illicit discharges, such as discharges of wash water from facility, floor mats, floors, porches, parking lots, alleys, sidewalks and street areas (in the immediate vicinity of the establishment), filters or garbage/trash containers.			X		
	Regular cleaning of storm drainage system				X	
	Outdoor storage area covered with fixed roof or temporary cover to prevent contact of pollutants with rainfall and runoff. Impervious surface				X	
	Routinely checks outdoor waste receptacle and ensures that only watertight waste receptacles are used and that lids are closed				X	
	Storm water runoff routed around operating, processing fueling, cleaning and storage areas				X	
	Recycle greases, used oil, oil filters, antifreeze, cleaning solutions, automotive batteries, hydraulic and trans. fluids.			X		
	Waste storage/pretreatment areas clean and free of spill or leaks.			X		
	Removes food waste, rubbish or other materials from parking lot areas in a sanitary manner that does not create a nuisance or discharge to the storm drain.			X		
	Proper disposal of air conditioning, cooling tower and condensate drains				X	
VEHICLE/EQUIPMENT FUELING	Fueling area design minimizes storm water exposure.					
	Covered fueling area					
	Perimeter drain or pavement sloped to containment sump					
	UST equipped with spill and overfill protection, permit					
	Above ground tanks within spill containment					

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

VEHICLE AND EQUIPMENT WASHING/CLEANING	Use off-site commercial washing and cleaning businesses.			X	
	Covered designated wash area to sewer/landscape				
	Exposed designated wash area to sewer/landscape				
	Covered designated wash area to containment sump				
	Exposed designated wash area to containment sump				
	Water recirculation/reclamation system used				
	Portable containment and vacuum collection of wastewater				
	On-site washing by vendor, wastewater disposal off-site				
	On-site washing by vendor, wastewater collected and disposal on-site, sewer/ landscape				

NOTES:

COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: May 7 1a. Current weather conditions: Clear
 2. Facility Name: Exhaust Works
 3. Site Address: 425-6 OLD COUNTY
 3. Contact Name: _____ Phone: 591-7062

4. Inspection Type: First Inspection Second Inspection New Facility Complaint Follow up
5. Permit Type: None Air Quality Fire Dept. (Storage) Underground Tanks
 Other _____ Hazmat Bus. Plan Hazardous waste AboveGround Tanks
6. Is the facility covered under a storm water permit? YES / NO Does not need coverage Individual NPDES
 WDID #: _____ NOI Filed SWPPP Required SWPPP on site? YES / NO
7. High Priority Site (significant threat to water quality)? YES / NO Explain _____
8. Facility Type: Automotive Services Gas Station USEPA Phase 1
 Food Service Grading Landscaping
 Commercial Other _____

9. Enforcement/Follow-Up

Date problem first identified: _____ Next follow-up inspection date: _____

Comments: No oil or liquids used. Need to be swepted up and general clean/pick up. Says that it will be done soon. Guy sick who does it. No NPDES threat

Enforcement: None/In Compliance Verbal Notice Notice to Comply Notice of Violation
 Stop Work Administrative Fine

10. Resolution: Problem Fixed Need More Time (include rationale in comments) Escalate Enforcement
 Date resolved: _____

Comments: _____

11. Inspector's Signature: [Signature] Date: MAY

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
MINIMUM BMP'S REQUIRED AND APPLICABLE TO ALL FACILITIES	No evidence of oil and grease or oil and grease residue onto a parking lot, street or adjacent catch basin.				/	
	Equipment kept clean, build up of oil and grease avoided. General good housekeeping. Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			/		could be cleaner
	Spill prevention and control procedures in place. Drip pans or containers available where needed. Adsorbent and cleaning materials on hand for use.			/		
	Soil erosion control BMP's in place				/	
	Employee training program on storm water issues and HazMat. Is aware of the prohibition on discharging of non storm water to the storm drain			/		
	No illicit discharges, such as discharges of wash water from facility, floor mats, floors, porches, parking lots, alleys, sidewalks and street areas (in the immediate vicinity of the establishment), filters or garbage/trash containers.			/		
	Regular cleaning of storm drainage system				/	
	Outdoor storage area covered with fixed roof or temporary cover to prevent contact of pollutants with rainfall and runoff. Impervious surface				/	
	Routinely checks outdoor waste receptacle and ensures that only watertight waste receptacles are used and that lids are closed			/		
	Storm water runoff routed around operating, processing fueling, cleaning and storage areas				/	
	Recycle greases, used oil, oil filters, antifreeze, cleaning solutions, automotive batteries, hydraulic and trans. fluids.				/	
	Waste storage/pretreatment areas clean and free of spill or leaks.				/	
	Removes food waste, rubbish or other materials from parking lot areas in a sanitary manner that does not create a nuisance or discharge to the storm drain.				/	
	Proper disposal of air conditioning, cooling tower and condensate drains				/	
	VEHICLE/EQUIPMENT FUELING	Fueling area design minimizes storm water exposure.				/
Covered fueling area					/	
Perimeter drain or pavement sloped to containment sump					/	
UST equipped with spill and overfill protection, permit					/	
Above ground tanks within spill containment					/	

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

VEHICLE AND EQUIPMENT WASHING/CLEANING	Use off-site commercial washing and cleaning businesses.					
	Covered designated wash area to sewer/landscape					
	Exposed designated wash area to sewer/landscape					
	Covered designated wash area to containment sump					
	Exposed designated wash area to containment sump					
	Water recirculation/reclamation system used					
	Portable containment and vacuum collection of wastewater					
	On-site washing by vendor, wastewater disposal off-site					
	On-site washing by vendor, wastewater collected and disposal on-site, sewer/ landscape					

NOTES:

COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: May 7 1a. Current weather conditions: Clear
2. Facility Name: Wheel Works / Howard Tlne
3. Site Address: 120 ECR
3. Contact Name: Jim Phone: 592-3200

4. Inspection Type: First Inspection Second Inspection New Facility Complaint Follow up
5. Permit Type: None Air Quality Fire Dept. (Storage) Underground Tanks
 Other _____ Hazmat Bus. Plan Hazardous waste AboveGround Tanks
6. Is the facility covered under a storm water permit? YES / NO Does not need coverage Individual NPDES
WDID #: _____ NOI Filed SWPPP Required SWPPP on site? YES / NO
7. High Priority Site (significant threat to water quality)? YES / NO Explain _____
8. Facility Type: Automotive Services Gas Station USEPA Phase 1
 Food Service Grading Landscaping
 Commercial Other _____

9. Enforcement/Follow-Up	Date problem first identified: _____	Next follow-up inspection date: _____
Comments: <u>Clean Shop</u> <u>Told to cover tires when it rains</u>		
Enforcement: <input checked="" type="checkbox"/> None/In Compliance <input type="checkbox"/> Verbal Notice <input type="checkbox"/> Notice to Comply <input type="checkbox"/> Notice of Violation <input type="checkbox"/> Stop Work <input type="checkbox"/> Administrative Fine		

10. Resolution: <input type="checkbox"/> Problem Fixed <input type="checkbox"/> Need More Time (include rationale in comments) <input type="checkbox"/> Escalate Enforcement
<input type="checkbox"/> Date resolved: _____
Comments: _____

11. Inspector's Signature: Just Date: 5/7/12

	ACTIVITIES ASSESSMENT CHECKLIST	BMP Effectiveness				COMMENTS
		N	P	A	N/A	
MINIMUM BMP'S REQUIRED AND APPLICABLE TO ALL FACILITIES	No evidence of oil and grease or oil and grease residue onto a parking lot, street or adjacent catch basin.			/		
	Equipment kept clean, build up of oil and grease avoided. General good housekeeping. Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			/		
	Spill prevention and control procedures in place. Drip pans or containers available where needed. Adsorbent and cleaning materials on hand for use.			/		
	Soil erosion control BMP's in place				/	
	Employee training program on storm water issues and HazMat. Is aware of the prohibition on discharging of non storm water to the storm drain			/		
	No illicit discharges, such as discharges of wash water from facility, floor mats, floors, porches, parking lots, alleys, sidewalks and street areas (in the immediate vicinity of the establishment), filters or garbage/trash containers.			/		
	Regular cleaning of storm drainage system				/	
	Outdoor storage area covered with fixed roof or temporary cover to prevent contact of pollutants with rainfall and runoff. Impervious surface				/	
	Routinely checks outdoor waste receptacle and ensures that only watertight waste receptacles are used and that lids are closed			/		
	Storm water runoff routed around operating, processing fueling, cleaning and storage areas				/	
	Recycle greases, used oil, oil filters, antifreeze, cleaning solutions, automotive batteries, hydraulic and trans. fluids.			/		
	Waste storage/pretreatment areas clean and free of spill or leaks.			/		
	Removes food waste, rubbish or other materials from parking lot areas in a sanitary manner that does not create a nuisance or discharge to the storm drain.			/		
	Proper disposal of air conditioning, cooling tower and condensate drains				/	
	VEHICLE/EQUIPMENT FUELING	Fueling area design minimizes storm water exposure.				/
Covered fueling area					/	
Perimeter drain or pavement sloped to containment sump					/	
UST equipped with spill and overfill protection, permit					/	
Above ground tanks within spill containment					/	

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

VEHICLE AND EQUIPMENT WASHING/CLEANING

Use off-site commercial washing and cleaning businesses.					
Covered designated wash area to sewer/landscape					
Exposed designated wash area to sewer/landscape					
Covered designated wash area to containment sump					
Exposed designated wash area to containment sump					
Water recirculation/reclamation system used					
Portable containment and vacuum collection of wastewater					
On-site washing by vendor, wastewater disposal off-site					
On-site washing by vendor, wastewater collected and disposal on-site, sewer/ landscape					

NOTES:

ACTIVITIES ASSESSMENT CHECKLIST	BMP Effectiveness				COMMENTS
	N	P	A	N/A	
No evidence of oil and grease or oil and grease residue onto a parking lot, street or adjacent catch basin.			/		
Equipment kept clean, build up of oil and grease avoided. General good housekeeping. Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			/		
Spill prevention and control procedures in place. Drip pans or containers available where needed. Adsorbent and cleaning materials on hand for use.			/		
Soil erosion control BMP's in place				/	
Employee training program on storm water issues and HazMat. Is aware of the prohibition on discharging of non storm water to the storm drain			/		
No illicit discharges, such as discharges of wash water from facility, floor mats, floors, porches, parking lots, alleys, sidewalks and street areas (in the immediate vicinity of the establishment), filters or garbage/trash containers.			/		
Regular cleaning of storm drainage system				/	
Outdoor storage area covered with fixed roof or temporary cover to prevent contact of pollutants with rainfall and runoff. Impervious surface				/	
Routinely checks outdoor waste receptacle and ensures that only watertight waste receptacles are used and that lids are closed				/	
Storm water runoff routed around operating, processing fueling, cleaning and storage areas				/	
Recycle greases, used oil, oil filters, antifreeze, cleaning solutions, automotive batteries, hydraulic and trans. fluids.			/		
Waste storage/pretreatment areas clean and free of spill or leaks.			/		
Removes food waste, rubbish or other materials from parking lot areas in a sanitary manner that does not create a nuisance or discharge to the storm drain.				/	
Proper disposal of air conditioning, cooling tower and condensate drains				/	
Fueling area design minimizes storm water exposure.				/	
Covered fueling area					
Perimeter drain or pavement sloped to containment sump					
UST equipped with spill and overfill protection, permit					
Above ground tanks within spill containment					

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: 7/6/11 1a. Current weather conditions: Clear

2. Facility Name: K & K Auto Service 2a. SIC No. _____

3. Site Address: 1296 Old County Rd

3. Contact Name: Ken Kwan Phone: 631-2888

4. Inspection Type: First Inspection Second Inspection New Facility Complaint Follow up

5. Permit Type: None Air Quality Fire Dept. (Storage) Underground Tanks
 Other _____ Hazmat Bus. Plan Hazardous waste AboveGround Tanks

6. Is the facility covered under a storm water permit? YES / NO Does not need coverage Individual NPDES
WDID #: _____ NOI Filed SWPPP Required SWPPP on site? YES / NO

7. High Priority Site (significant threat to water quality)? YES / NO Explain _____

8. Facility Type: Automotive Services Gas Station USEPA Phase 1
 Food Service Grading Landscaping
 Commercial Other _____

9. Enforcement/Follow-Up

Date problem first identified:	Next follow-up inspection date:
_____	<u>8/16/11</u>

Comments: No double containment for oil/waste fluids
No spill kit

Enforcement: None/In Compliance Verbal Notice Notice to Comply Notice of Violation
 Stop Work Administrative Fine

10. Resolution: Problem Fixed Need More Time (include rationale in comments) Escalate Enforcement
 Date resolved: _____

Comments: _____

11. Inspector's Signature: _____ Date: _____

	ACTIVITIES ASSESSMENT CHECKLIST	BMP Effectiveness				COMMENTS
		N	P	A	N/A	
MINIMUM BMP'S REQUIRED AND APPLICABLE TO ALL FACILITIES	Termination of all non-storm water discharge to storm drain.				/	
	General good housekeeping			/		
	Regular, scheduled preventive maintenance.			/		
	Spill prevention and control procedures in place.	/				
	Soil erosion control.				/	
	Employee training program on storm water issues			/		
	Post on-site storm drains to indicate they are not to receive liquid or solid wastes				/	
	Regular cleaning of storm drainage system				/	
	Adsorbent and cleaning materials on hand for use	/				
	Storm water runoff routed around operating, processing fueling, cleaning and storage areas				/	
	Hose bibs eliminated or posted				/	
	Proper disposal of air conditioning, cooling tower and condensate drains				/	
	VEHICLE/EQUIPMENT FUELING	Fueling area design minimizes storm water exposure.				/
Covered fueling area					/	
Perimeter drain or pavement sloped to containment sump					/	
UST equipped with spill and overfill protection, permit					/	
Above ground tanks within spill containment					/	
VEHICLE AND EQUIPMENT WASHING/STEAM CLEANING	Use off-site commercial washing and cleaning businesses.			/		
	Covered designated wash area, sewered under permit				/	
	Exposed designated wash area, sewered w/RDS, permit				/	
	Covered designated wash area, containment sump, permit				/	
	Exposed designated wash area, containment sump, permit				/	
	Water recirculation/reclamation system used				/	
	Demineralized/ultra-pure water spray rinse, no runoff				/	
	Portable containment and vacuum collection of wastewater				/	
	On-site washing by vendor, wastewater disposal off-site				/	
	On-site washing by vendor, wastewater collected and disposal on-site, permit				/	

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
VEHICLE & EQUIPMENT MAINTENANCE	Equipment kept clean, build up of oil and grease avoided.			/		
	Drip pans or containers available where needed			/		
	Covered designated maintenance area w/spill containment.	/			/	
	Exposed designated maintenance area w/spill containment.				/	
	Recycle greases, used oil/filters, antifreeze, cleaning solutions, automotive batteries, other fluids.			/		
	Use non-toxic chemicals for maintenance when possible.				/	
	Store idle equipment under cover				/	
OUTDOOR LOADING AND UNLOADING OF MATERIALS	Operations within designated area w/spill containments.				/	
	Fully covered loading/unloading docks				/	
	Partially covered loading/unloading docks				/	
	Seal or door skirt between trailer and building.				/	
	Truck well w/manual sump pump, spill procedure posted.				/	
	Truck well w/RDS system and permit. Spill procedure posted				/	
	Drip pans or containers used under hoses or transfer operations.				/	
OUTDOOR PROCESS EQUIPMENT	Move activity indoors				/	
	Cover the area with a permanent roof				/	
	Storm water runoff routed around process area				/	
	Process wastes piped directly to sewer pretreatment system				/	
	Spill containment for process areas				/	
	Air emission control equipment under AQMD permit				/	
OUTSIDE STORAGE	Store materials indoors.				/	
	Cover storage area with fixed roof or temporary cover				/	
	Store materials on paved or impervious surfaces				/	
	Store materials within containment berms.				/	
	Sweep and maintain routes to and from storage areas.				/	

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
WASTE HANDLING AND DISPOSAL	Recycle materials within plant or to off-site facilities.			/		
	Valid sewer disposal permit and pretreatment system in place				/	
	Hazardous waste generator license or permit in place			/		
	Wastes segregated by type, labeled and dated.			/		
	Waste storage/pretreatment areas clean and free of spill or leaks.			/		
	Proper records maintained on waste storage and disposal.			/		
FORM 4B AUTOMOTIVE SERVICES	Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			/		
	Implements housekeeping bmps to prevent spills and leaks	/				
	Properly discharges wastewaters to a sanitary sewer and/or contains wastewaters for transfer to a legal point of disposal			/		
	Is aware of the prohibition on discharging of non storm water to the storm drain			/		
	Properly manages raw and waste materials including proper disposal of hazardous waste			/		
	Protects outdoor work and storage areas to prevent contact of pollutants with rainfall and runoff				/	
	Labels, inspects and routinely cleans storm drain inlets that are located on the facility's property				/	
	Trains employees to implement storm water pollution prevention practices			/		
FORM 4C RETAIL GASOLINE STATION AUTOMOBILE DEALERSHIP	Routinely sweeps fuel-dispensing areas for removal of litter and debris, and keep rags and absorbent ready for use in case of leaks and spills.	/				
	Is aware that wash down of facility area to the storm drain is prohibited			/		
	Is aware of design flaws (such as grading that doesn't prevent run-on or inadequate roof covers and berms) and that equivalent BMPs are implemented				/	
	Inspects and cleans storm drain inlets and catch basins within each facility's boundaries no later than October 1st of each year.				/	
	Posts signs close to fuel dispensers, which warn vehicle owners/operators against "topping off" of vehicle fuel tanks and installation of automatic shutoff fuel dispensing nozzles				/	
	Routinely checks outdoor waste receptacle and air/water supply areas, cleans leaks and drips, and ensures that only watertight waste receptacles are used and that lids are closed				/	
	Trains employees to properly manage hazardous materials and wastes as well as to implement other storm water pollution prevention practices			/		

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable



11/30/11

COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: ~~10/11/11~~ 1a. Current weather conditions: clear

2. Facility Name: Auto Care of Redwood Shores 2a. SIC No. _____

3. Site Address: 230 Old Canyon

3. Contact Name: Bishara Saba Phone: 591-3111

4. Inspection Type: First Inspection Second Inspection New Facility Complaint Follow up
5. Permit Type: None Air Quality Fire Dept. (Storage) Underground Tanks
 Other _____ Hazmat Bus. Plan Hazardous waste AboveGround Tanks
6. Is the facility covered under a storm water permit? YES / NO Does not need coverage Individual NPDES
 WDID #: _____ NOI Filed SWPPP Required SWPPP on site? YES / NO
7. High Priority Site (significant threat to water quality)? YES / NO NO Explain _____
8. Facility Type: Automotive Services Gas Station USEPA Phase 1
 Food Service Grading Landscaping
 Commercial Other _____

9. Enforcement/Follow-Up

Date problem first identified: _____ Next follow-up inspection date: _____

Comments: Shop could be cleaner, but passable.
They perform engine cleaning & shop floor is draining into
SS CB, but can ~~entry~~ ~~entry~~ easily get into street.

Enforcement: None/In Compliance Verbal Notice Notice to Comply Notice of Violation
 Stop Work Administrative Fine

10. Resolution: Problem Fixed Need More Time (include rationale in comments) Escalate Enforcement
 Date resolved: _____

Comments: _____

11. Inspector's Signature: _____ Date: _____

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
VEHICLE & EQUIPMENT MAINTENANCE	Equipment kept clean, build up of oil and grease avoided.		X	X		Could be cleaner
	Drip pans or containers available where needed			X		
	Covered designated maintenance area w/spill containment.			X		
	Exposed designated maintenance area w/spill containment.			X		
	Recycle greases, used oil/filters, antifreeze, cleaning solutions, automotive batteries, other fluids.			X		
	Use non-toxic chemicals for maintenance when possible.			X		
	Store idle equipment under cover			X		
OUTDOOR LOADING AND UNLOADING OF MATERIALS	Operations within designated area w/spill containments.			X		
	Fully covered loading/unloading docks					
	Partially covered loading/unloading docks					
	Seal or door skirt between trailer and building.					
	Truck well w/manual sump pump, spill procedure posted.					
	Truck well w/RDS system and permit. Spill procedure posted					
OUTDOOR PROCESS EQUIPMENT	Drip pans or containers used under hoses or transfer operations.					
	Move activity indoors					
	Cover the area with a permanent roof					
	Storm water runoff routed around process area					
	Process wastes piped directly to sewer pretreatment system					
	Spill containment for process areas					
OUTSIDE STORAGE	Air emission control equipment under AQMD permit					
	Store materials indoors.					
	Cover storage area with fixed roof or temporary cover					
	Store materials on paved or impervious surfaces					
	Store materials within containment berms.					
	Sweep and maintain routes to and from storage areas.					

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
WASTE HANDLING AND DISPOSAL	Recycle materials within plant or to off-site facilities.			X		
	Valid sewer disposal permit and pretreatment system in place				X	
	Hazardous waste generator license or permit in place			X		
	Wastes segregated by type, labeled and dated.			X		
	Waste storage/pretreatment areas clean and free of spill or leaks.			X		
	Proper records maintained on waste storage and disposal.			X		
FORM 4B AUTOMOTIVE SERVICES	Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			X		
	Implements housekeeping bmps to prevent spills and leaks			X		
	Properly discharges wastewaters to a sanitary sewer and/or contains wastewaters for transfer to a legal point of disposal			X		
	Is aware of the prohibition on discharging of non storm water to the storm drain			X		
	Properly manages raw and waste materials including proper disposal of hazardous waste			X		
	Protects outdoor work and storage areas to prevent contact of pollutants with rainfall and runoff			X		talked about impervious
	Labels, inspects and routinely cleans storm drain inlets that are located on the facility's property			X		
	Trains employees to implement storm water pollution prevention practices			X		
FORM 4C RETAIL GASOLINE STATION AUTOMOBILE DEALERSHIP	Routinely sweeps fuel-dispensing areas for removal of litter and debris, and keep rags and absorbent ready for use in case of leaks and spills.				X	
	Is aware that wash down of facility area to the storm drain is prohibited			X		Implemented
	Is aware of design flaws (such as grading that doesn't prevent run-on or inadequate roof covers and berms) and that equivalent BMPs are implemented			X		
	Inspects and cleans storm drain inlets and catch basins within each facility's boundaries no later than October 1st of each year.				X	
	Posts signs close to fuel dispensers, which warn vehicle owners/operators against "topping off" of vehicle fuel tanks and installation of automatic shutoff fuel dispensing nozzles				X	
	Routinely checks outdoor waste receptacle and air/water supply areas, cleans leaks and drips, and ensures that only watertight waste receptacles are used and that lids are closed				X	
	Trains employees to properly manage hazardous materials and wastes as well as to implement other storm water pollution prevention practices			X		

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable



COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: 11/30/11 1a. Current weather conditions: Clear
 2. Facility Name: Silver Star Auto Body 2a. SIC No. 7532-01
 3. Site Address: 252 Old County Rd.
 3. Contact Name: Camilo Barberena Phone: 508-1192

4. Inspection Type: First Inspection Second Inspection New Facility Complaint Follow up
5. Permit Type: None Air Quality Fire Dept. (Storage) Underground Tanks
 Other _____ Hazmat Bus. Plan Hazardous waste AboveGround Tanks
6. Is the facility covered under a storm water permit? YES / NO Does not need coverage Individual NPDES
 WDID #: _____ NOI Filed SWPPP Required SWPPP on site? YES / NO
7. High Priority Site (significant threat to water quality)? YES / NO Explain _____
8. Facility Type: Automotive Services Gas Station USEPA Phase 1
 Food Service Grading Landscaping
 Commercial Other _____

9. Enforcement/Follow-Up

Date problem first identified: 11/30/11 Next follow-up inspection date: none (drive by's)

Comments: Good shop, just needed to educate new employee & refresh employees that washing into the street is not allowed

Enforcement: None/In Compliance Verbal Notice Notice to Comply Notice of Violation
 Stop Work Administrative Fine

10. Resolution: Problem Fixed Need More Time (include rationale in comments) Escalate Enforcement
 Date resolved: 11/30/11

Comments: _____

11. Inspector's Signature: _____ Date: _____

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
MINIMUM BMP'S REQUIRED AND APPLICABLE TO ALL FACILITIES	Termination of all non-storm water discharge to storm drain.		X	A		Education plan stopped
	General good housekeeping			X		
	Regular, scheduled preventive maintenance.			X		
	Spill prevention and control procedures in place.			X		Needs more, but ok
	Soil erosion control.				X	
	Employee training program on storm water issues			X		
	Post on-site storm drains to indicate they are not to receive liquid or solid wastes				X	
	Regular cleaning of storm drainage system				X	
	Adsorbent and cleaning materials on hand for use			X		Need more
	Storm water runoff routed around operating, processing fueling, cleaning and storage areas			X		
	Hose bibs eliminated or posted				X	
	Proper disposal of air conditioning, cooling tower and condensate drains				X	
VEHICLE/EQUIPMENT FUELING	Fueling area design minimizes storm water exposure.					
	Covered fueling area					
	Perimeter drain or pavement sloped to containment sump					
	UST equipped with spill and overfill protection, permit					
	Above ground tanks within spill containment					
VEHICLE AND EQUIPMENT WASHING/STEAM CLEANING	Use off-site commercial washing and cleaning businesses.				X	
	Covered designated wash area, sewered under permit				X	
	Exposed designated wash area, sewered w/RDS, permit			X	X	
	Covered designated wash area, containment sump, permit				X	
	Exposed designated wash area, containment sump, permit			X		
	Water recirculation/reclamation system used				X	
	Deminerlized/ultra-pure water spray rinse, no runoff				X	
	Portable containment and vacuum collection of wastewater				X	
	On-site washing by vendor, wastewater disposal off-site				X	
On-site washing by vendor, wastewater collected and disposal on-site, permit				X		

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
VEHICLE & EQUIPMENT MAINTENANCE	Equipment kept clean, build up of oil and grease avoided.			X		
	Drip pans or containers available where needed				X	
	Covered designated maintenance area w/spill containment.				X	
	Exposed designated maintenance area w/spill containment.				X	
	Recycle greases, used oil/filters, antifreeze, cleaning solutions, automotive batteries, other fluids.				X	
	Use non-toxic chemicals for maintenance when possible.				X	
	Store idle equipment under cover			X		
OUTDOOR LOADING AND UNLOADING OF MATERIALS	Operations within designated area w/spill containments.					
	Fully covered loading/unloading docks					
	Partially covered loading/unloading docks					
	Seal or door skirt between trailer and building.					
	Truck well w/manual sump pump, spill procedure posted.					
	Truck well w/RDS system and permit. Spill procedure posted					
	Drip pans or containers used under hoses or transfer operations.					
OUTDOOR PROCESS EQUIPMENT	Move activity indoors					
	Cover the area with a permanent roof					
	Storm water runoff routed around process area					
	Process wastes piped directly to sewer pretreatment system					
	Spill containment for process areas					
Air emission control equipment under AQMD permit			?		Paint shop BAAQMD	
OUTSIDE STORAGE	Store materials indoors.			X		
	Cover storage area with fixed roof or temporary cover					
	Store materials on paved or impervious surfaces					
	Store materials within containment berms.					
	Sweep and maintain routes to and from storage areas.					

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
WASTE HANDLING AND DISPOSAL	Recycle materials within plant or to off-site facilities.			X		
	Valid sewer disposal permit and pretreatment system in place				X	
	Hazardous waste generator license or permit in place					
	Wastes segregated by type, labeled and dated.					
	Waste storage/pretreatment areas clean and free of spill or leaks.			X		
	Proper records maintained on waste storage and disposal.			?		
FORM 4B AUTOMOTIVE SERVICES	Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			X		
	Implements housekeeping bmps to prevent spills and leaks			X		
	Properly discharges wastewaters to a sanitary sewer and/or contains wastewaters for transfer to a legal point of disposal			X		
	Is aware of the prohibition on discharging of non storm water to the storm drain			X		
	Properly manages raw and waste materials including proper disposal of hazardous waste			X		
	Protects outdoor work and storage areas to prevent contact of pollutants with rainfall and runoff			X		
	Labels, inspects and routinely cleans storm drain inlets that are located on the facility's property				X	
	Trains employees to implement storm water pollution prevention practices			X		
FORM 4C RETAIL GASOLINE STATION AUTOMOBILE DEALERSHIP	Routinely sweeps fuel-dispensing areas for removal of litter and debris, and keep rags and absorbent ready for use in case of leaks and spills.					
	Is aware that wash down of facility area to the storm drain is prohibited					
	Is aware of design flaws (such as grading that doesn't prevent run-on or inadequate roof covers and berms) and that equivalent BMPs are implemented					
	Inspects and cleans storm drain inlets and catch basins within each facility's boundaries no later than October 1st of each year.					
	Posts signs close to fuel dispensers, which warn vehicle owners/operators against "topping off" of vehicle fuel tanks and installation of automatic shutoff fuel dispensing nozzles					
	Routinely checks outdoor waste receptacle and air/water supply areas, cleans leaks and drips, and ensures that only watertight waste receptacles are used and that lids are closed					
	Trains employees to properly manage hazardous materials and wastes as well as to implement other storm water pollution prevention practices					

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

ENTERED

COMMERCIAL SITE INSPECTION REPORT

1. Inspection Date: 4/5/12 1a. Current weather conditions: clear
 2. Facility Name: 5 Star
 3. Site Address: 1444 El Camino Real
 3. Contact Name: Najib Batscha Phone: 595 1200

4. Inspection Type: First Inspection Second Inspection New Facility Complaint Follow up

5. Permit Type: None Air Quality Fire Dept. (Storage) Underground Tanks
 Other _____ Hazmat Bus. Plan Hazardous waste AboveGround Tanks

6. Is the facility covered under a storm water permit? YES / NO Does not need coverage Individual NPDES
 WDID #: _____ NOI Filed SWPPP Required SWPPP on site? YES / NO

7. High Priority Site (significant threat to water quality)? YES / NO Explain _____

8. Facility Type: Automotive Services Gas Station USEPA Phase 1
 Food Service Grading Landscaping
 Commercial Other _____

9. Enforcement/Follow-Up

Date problem first identified: _____	Next follow-up inspection date: _____
Comments: <u>Shop is clean</u>	
Enforcement: <input checked="" type="checkbox"/> None/In Compliance <input type="checkbox"/> Verbal Notice <input type="checkbox"/> Notice to Comply <input type="checkbox"/> Notice of Violation <input type="checkbox"/> Stop Work <input type="checkbox"/> Administrative Fine	

10. Resolution: Problem Fixed Need More Time (include rationale in comments) Escalate Enforcement
 Date resolved: _____

Comments: _____

11. Inspector's Signature: [Signature] Date: April 5 2012

ACTIVITIES ASSESSMENT CHECKLIST		BMP Effectiveness				COMMENTS
		N	P	A	N/A	
MINIMUM BMP'S REQUIRED AND APPLICABLE TO ALL FACILITIES	No evidence of oil and grease or oil and grease residue onto a parking lot, street or adjacent catch basin.			X		
	Equipment kept clean, build up of oil and grease avoided. General good housekeeping. Maintains the facility area so that it is clean and dry and without evidence of excessive staining.			X		
	Spill prevention and control procedures in place. Drip pans or containers available where needed. Adsorbent and cleaning materials on hand for use.			X		
	Soil erosion control BMP's in place				X	
	Employee training program on storm water issues and HazMat. Is aware of the prohibition on discharging of non storm water to the storm drain			X		
	No illicit discharges, such as discharges of wash water from facility, floor mats, floors, porches, parking lots, alleys, sidewalks and street areas (in the immediate vicinity of the establishment), filters or garbage/trash containers.			X		
	Regular cleaning of storm drainage system				X	
	Outdoor storage area covered with fixed roof or temporary cover to prevent contact of pollutants with rainfall and runoff. Impervious surface				X	
	Routinely checks outdoor waste receptacle and ensures that only watertight waste receptacles are used and that lids are closed			X		
	Storm water runoff routed around operating, processing fueling, cleaning and storage areas			X		
	Recycle greases, used oil, oil filters, antifreeze, cleaning solutions, automotive batteries, hydraulic and trans. fluids.			X		
	Waste storage/pretreatment areas clean and free of spill or leaks.			X		
	Removes food waste, rubbish or other materials from parking lot areas in a sanitary manner that does not create a nuisance or discharge to the storm drain.			X		
	Proper disposal of air conditioning, cooling tower and condensate drains			X		
VEHICLE/EQUIPMENT FUELING	Fueling area design minimizes storm water exposure.				X	
	Covered fueling area				X	
	Perimeter drain or pavement sloped to containment sump				X	
	UST equipped with spill and overfill protection, permit				X	
	Above ground tanks within spill containment				X	

BMP Effectiveness: N = Not Implemented; P = Poorly Implemented; A = Adequately Implemented; N/A = Not Applicable

VEHICLE AND EQUIPMENT WASHING/CLEANING	Use off-site commercial washing and cleaning businesses.				X	
	Covered designated wash area to sewer/landscape				X	
	Exposed designated wash area to sewer/landscape				A	
	Covered designated wash area to containment sump				X	
	Exposed designated wash area to containment sump				X	
	Water recirculation/reclamation system used				X	
	Portable containment and vacuum collection of wastewater				X	
	On-site washing by vendor, wastewater disposal off-site				X	
	On-site washing by vendor, wastewater collected and disposal on-site, sewer/ landscape				X	

NOTES:

STORMWATER INSPECTIONS & VIOLATIONS SUMMARY

Municipality: Belmont
 Period Covered by this Report: July 1 through Sept 30, 2011
 Period Covered by the Previous Report: April 1 through June 30, 2011
 Date: 10/11/10

Total Number of Inspections:	1	0	
Total Number of Violations:	0	0	
Total Follow-up Actions:	0	0	
Total Violations Corrected:	na	na	
Total Violations Pending:	0	0	

NAME ADDRESS TYPE OF BUSINESS	VIOL. DATE	INSP	TYPES OF VIOLATIONS		COMMENTS AND/OR DESCRIPTION OF VIOLATION	ENFORCEMENT ACTIONS					FOLLOW-UP ACTION	VIOLATIONS CORRECTED (YES/NO)	DATE CORRECTED	
			PTNL + BMP ≥ 4	NSW		N O N E	V W	W N	A A \$	L A				
					including whether violating flow reached a creek or other waterbody, (name waterbody)									

Type of Violation:
 PTNL + BMP ≥ 4
 NSW Non-Stormwater Discharge

If the combined value of high potential for a Pollutant Discharge plus poor BMPs equals 4, Follow-up Action is required Discharge of non-stormwater materials to storm drain system. Non-stormwater discharges are allowed by the NPDES permit as conditionally exempted should not be identified as a NSW violation.

Enforcement Actions:
 None No Action Taken
 VW Verbal Warning
 WN Warning Notice

AA\$ Admin. Action with Penalty
 LA Legal Notice



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR 068190 \$

City: Belmont Unincorporated
 Date: 7/27/2001 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Dry Cal Cleaners SITE ADDRESS: 540 Marlene Way
 CONTACT NAME: Jay Am PHONE: 551-0000 BUSINESS TYPE/ACTIVITY: Dry Cleaners SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other pet hydrocarbons

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other
 Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	↓				
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas					
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

The business does not discharge any material to the storm drain system.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None <input type="checkbox"/> 1. Verbal Warning <input type="checkbox"/> 2. Warning Notice or Admin. Action <input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery <input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Jay Am Inspector: Robert Kelian
 L/Open/Hazmat/Admin/Current/Forms/Stormwater/20101020

STORMWATER INSPECTIONS & VIOLATIONS SUMMARY

Municipality: Belmont
 Period Covered by this Report: October 1 through Dec 30, 2011
 Period Covered by the Previous Report: July 1 through September 30, 2011
 Date: 01/26/12

	Haz Mat	Food
Total Number of Inspections:	25	2
Total Number of Violations:	6	0
Total Follow-up Actions:	6	0
Total Violations Corrected:	6	na
Total Violations Pending:	0	0

NAME ADDRESS TYPE OF BUSINESS	VIOL. DATE	INSP	TYPES OF VIOLATIONS		COMMENTS AND/OR DESCRIPTION OF VIOLATION	ENFORCEMENT ACTIONS					FOLLOW-UP ACTION	VIOLATIONS CORRECTED (YES/NO)	DATE CORRECTED	
			PTNL + BMP ≥ 4	NSW		V	W	A	L	A				
					including whether violating flow reached a creek or other waterbody, (name waterbody)									
Bay Pacific Auto Body, 1305 Elmer	29-Nov	MG	yes	no	Trash at back of the building needs to be rectified asap. Paint container placed outside the fence needs to be removed		*				Back area where the trash , paint containers and cardboard wer have been removed and everytghing looks great	yes	14-Dec	

Belmont Iceland, 815 Old County Rd	28-Dec	MG	yes	no	Trash container, cardboard needs to be disposed of properly. In backyard, trash(plastic, cardboard) needs to be swept, organized and dispose of properly. There's a bunch of ice in the backyard but it was melting gradually. Needs to be re-inspected on 1/4/2012.	*				Swept, organized, removed the trash & properly disposed of. Everything looks cleaned & organized during visit. Violation will be closed.	Yes	1/4/2012
MPWD Hersom Pump Stn, 1906 Lyon Ave	21-Dec	MG	yes	no	1-Found empty bucket inside the pump station, needs to be removed after the repair of facility roof. 2- Coolant generator leak needs to be repaired ASAP. 3- Roof/ceiling needs to repair ASAP.Re-inspect on 1/10/2012. 4- Storm drain outside the pump station needs a screen and to be cleaned.	*				2 -Coolant leak from the generator has been fixed, cleaned and removed.3 - Roof ceiling has been repaired. 1 - Empty paint can inside removed. 4- Removed dried leaves by the storm drain, installed clean screen.No violations observed.	Yes	Reinspected 1/10/2012

MRWD Hallmark Pump Stn, 2843 Hallmark Ave	21-Dec	MG	yes	no	Oil was dripping under the generator needs to be wiped out or removed. Reinspect on 1/10/2012. Recommend placing a spill kit in the facility.	*				Generator fixed, Rectified the dripping oil from generator, wiped and cleaned excessive oil underneath generator. Facility purchased spill kits for the facility. No violations observed.	Yes	Reinspected 1/10/2012
Plasma Technoloyg Systems, 276 Harbor	1-Dec	MG	yes	no	Trash and recycling Bin area needs to be cleaned	*				Trash has been properly disposed.	Yes	Reinspected 12/14/11
Mid Peninsula Water District, 3 Dairy In.	6-Dec	MG	yes	no	Found paint was poured on the ground and few cans with wet paint.	*				everything looks great, wet paint has been removed	yes	14-Dec

Type of Violation:

PTNL + BMP ≥ 4
NSW Non-Stormwater Discharge

If the combined value of high potential for a Pollutant Discharge plus poor BMPs equals 4, Follow-up Action is required Discharge of non-stormwater materials to storm drain system. Non-stormwater discharges are allowed by the NPDES permit as conditionally exempted should not be identified as a NSW violation.

Enforcement Actions:

None No Action Taken
VW Verbal Warning
WN Warning Notice

AA\$ Admin. Action with Penalty
LA Legal Notice



PR 0046676
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water, Healthy Community.

City: Belmont Unincorporated
 Date: 12/6/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due: P/4/11

NAME OF FACILITY: Mid Peninsular Water District SITE ADDRESS: 3 Dairy Lane

CONTACT NAME: Stan Olsen PHONE: 650-591-8944 BUSINESS TYPE/ACTIVITY: District Corridor SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	/				
B. Outdoor Material Storage Areas		1	0		
C. Outdoor Waste Storage/Disposal Areas		2	2		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		1	0		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	/				
G. Rooftop Equipment	/				
H. Outdoor Drainage from Indoor Areas	/				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

*Found paint was poured on the ground and few cans with wet paint.
 Violation will be assessed if the item above is not corrected.*

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None Verbal Warning Warning Notice or Admin. Action Admin. Action with Penalty &/or Cost Recovery Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: [Signature]



PR 00466-76
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

San Mateo County Health System
 Environmental Health Services Division
 2000 Alameda de las Pulgas, Suite 100,
 San Mateo, CA 94403
 (650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Mid Peninsula Water District Phone # _____
 Business Address 3 Dairy Lane City Belmont
 Inspector Mac Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 12/14/11
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<i>Everything's looks great, wet paint can has been removed.</i>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<i>Violation has been corrected and case will be closed.</i>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: _____

[Handwritten Signature]

Printed: STAN OLSEN

Date: 12/14/11



PR 0040337
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

San Mateo County Health System
 Environmental Health Services Division
 2000 Alameda de las Pulgas, Suite 100,
 San Mateo, CA 94403
 (650) 372-6200 Fax (650) 627-8244
 WWW.FLOWSTOBAY.ORG

Roime
~~Stormwater Inspection~~
MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Bay Pacific Auto Body Phone # 650-591-9137
 Business Address 1305 Elmer St City Belmont
 Inspector Mae Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 11/29/11
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	<u>Corrective Actions Taken:</u> Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	- trash at the back of the building needs to be rectified or disposed in the proper bin.
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	- paint container placed outside closed by the fence needs to be removed
F. Outdoor Wash Areas	- washing their vehicle not by the sewer area but the waste water never went to the storm drain.
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	- violation ^{fine} will be assessed if the violation not corrected by Dec. 15 th , 2011

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: [Signature] Printed: Manuel Lim Date: 11/29/11



PR0040337

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

San Mateo County Health System
 Environmental Health Services Division
 2000 Alameda de las Pulgas, Suite 100,
 San Mateo, CA 94403
 (650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Bay Pacific Auto Body Phone # 650-591-9137
 Business Address 1305 Elmer St. City Belmont
 Inspector Mae Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 12/14/11
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	<u>Corrective Actions Taken:</u> Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<u>Back area where the trash, paint containers, cardboard has been removed and everything's looks great during my visit.</u>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	<u>Note: Recycling and trash comes every Tuesday morning</u>
F. Outdoor Wash Areas	<u>Sewer area look neat and been removed and swept all the trash, weeds etc.</u>
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<u>Violation has been corrected and stormwater violation has been closed.</u>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature:

Printed: Manuel Lim

Date: 12/14/11



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR 0040353

City: Belmont Unincorporated
 Date: 12/28/11 Food HazMat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due: 1/4/2012

NAME OF FACILITY: Belmont Iceland SITE ADDRESS: 815 Old County Road

CONTACT NAME: Alyssa Lewis PHONE: 650-592-0522 BUSINESS TYPE/ACTIVITY: Ice Skating rink SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas		2	0		
B. Outdoor Material Storage Areas		2	0		
C. Outdoor Waste Storage/Disposal Areas		2	2		See Below
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		2	0		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas		2	0		bunch of ice was melting gradually
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Trash container, cardboard needs to dispose properly; At the backyard, trash (plastic, cardboard) needs to be swept, organized and disposed properly also. There's bunch of ice was placed at the backyard but it was melting gradually. Needs to re-inspect on 1/4/12

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input checked="" type="checkbox"/> High - Annual		<input type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input checked="" type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Alyssa Lewis Inspector: Mae Gardner
 L/Open/Hazmat/Admin/CurrentForms/Stormwater/0101020

PRO040353



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

San Mateo County Health System Environmental Health Services Division 2000 Alameda de las Pulgas, Suite 100, San Mateo, CA 94403 (650) 372-6200 Fax (650) 627-8244 WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Belmont Iceland Phone # 650-592-0532 Business Address 815 Old County Road City Belmont Inspector Mae Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

- 1. Correct the violations noted on the Stormwater Inspection Report dated
2. Note the Corrective Actions Taken in the Table provided.
3. Sign the certification below and retain yellow copy for your records. Return the signed original white copy of this Minor Violation - Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

Table with 2 columns: ACTIVITY AREAS and Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, and Other (describe):

CERTIFICATION

With respect to the foregoing violations, I state that:

- 1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: Alyssa NoLewis Printed: Alyssa NOLEWIS Date: 1/4/12



PR 0049915
SAN MATEO COUNTYWIDE
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San Mateo County Health System
 Environmental Health Services Division
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~~Stormwater Inspection~~
MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Nisma Technology Systems Phone # 650-590-1600
 Business Address 270 Harbor Blvd City Belmont
 Inspector Mac Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 12/1/11
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation - Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<i>Trash and Recycling Bin area needs to be cleaned</i>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<i>The outdoor junked storage area was cleaned and properly maintained. Hauler comes once a week to pick up their waste disposal.</i>
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<i>Re-inspect on 12/14/11 - garbage and Recycling Bin area.</i>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature:

Printed: Alan Antipovda

Date: 12/1/2011



PR 0049915
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 Environmental Health Services Division
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WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Plasma Technology System Phone # 650-596-1606
 Business Address 276 Harbor Blvd City Belmont
 Inspector Mae Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 12/14/11
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<u>empty bottle of trash has been properly disposed.</u>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<u>Violation has been corrected and case will be closed</u>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: [Signature] Printed: Alan Antipovda Date: 12/14/11

PR 00 47888



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 12/21/11 Standard Stormwater Facility Inspection Report Form

Reason for Inspection: [] First Inspection [X] Routine Inspection [] Response to Complaint [] Follow-up Follow-up / Re-inspection Due: 1/10/2012

NAME OF FACILITY: MPWD Aersom Pump Station SITE ADDRESS: 1200 Lynn Ave

CONTACT NAME: Ron Leithner PHONE: 650-591-8241 BUSINESS TYPE/ACTIVITY: MPWD Pump Station SIC:

Pollutants of Concern Used at Facility? [] yes [X] no If yes, indicate which ones: [] PCBs [] Mercury [] Copper [] Other

Is the facility covered under any other programs or permits? (Check all that apply.) [] Air quality [] Fire department (hazmat storage) [] Hazmat business plan [] Hazmat waste generator [] None [] Sanitary sewer [] Underground storage tanks [] Retail food facility [] Above ground storage tanks [] Other

Is the facility covered under a storm water permit? [X] Does not need coverage [] Individual [] No, but may need to be (Refer to Water Board staff) [] General: Does the facility have a SWPPP? [] yes [] no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effectiveness, Actual Discharge, NSW. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas (inside), Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, Other (describe).

COMMENTS/REMARKS/REQUIREMENTS Structural control present [] Maintenance required in storm drain system [] yes [] no - Found empty bucket inside the pump station and needs to be remove after the repair of the facility roof - Coolant generator leak needs to repair ASAP. - Roof / ceiling needs to repair ASAP. - Re-inspect on 1/10/2012 - call prior to appt - Storm drain outside the pump station needs to be cleaned

PRIORITY ROUTINE INSPECTION: [X] High - Annual [] Medium - every 2 yrs. [] Low - every 5 yrs. [] Referred to: ENFORCEMENT LEVELS: [X] 1. Verbal Warning [] 2. Warning Notice or Admin. Action [] 3. Admin. Action with Penalty &/or Cost Recovery [] 4. Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? [] N/A [X] yes [] no or (see Follow-Up Inspection Report)

Facility Representative: Ron Leithner Inspector: Mae Gardner

PR 0047888



**SAN MATEO COUNTYWIDE
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Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name MPWD, Herson Pumpstation Phone # 650-591-8941
Business Address 1906 Lyon Ave City Belmont
Inspector Max Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 1/10/12
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<i>Removed the dried leaves by the storm drain</i>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas <i>Cin side</i>	<i>Has been fixed, cleaned and removed excessive oil from the generator</i>
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	<i>Has been swept and installed the screen to avoid clog</i>
I. Other (describe):	<i>Roof ceiling has been repaired and removed by paint company can inside the facility. No violation observed.</i>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: Ron Leithner

Printed: Ron Leithner Date: 1/10/12

PR 0047883



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Unincorporated Date: 12/21/2011 Food Haz Mat Standard Stormwater Facility Inspection Report Form

Reason for Inspection: [] First Inspection [x] Routine Inspection [] Response to Complaint [] Follow-up Follow-up / Re-Inspection Due: 1/10/2012

NAME OF FACILITY: MPWD Hallmark Pumpstation SITE ADDRESS: Hallmark Dr.

CONTACT NAME: Ron Lechner PHONE: 650-591-8994 BUSINESS TYPE/ACTIVITY: MPWD Pumpstation SIC:

Pollutants of Concern Used at Facility? [] yes [x] no If yes, indicate which ones: [] PCBs [] Mercury [] Copper [] Other

Is the facility covered under any other programs or permits? (Check all that apply.) [] Air quality [] Fire department (hazmat storage) [] Hazmat business plan [x] Hazmat waste generator [] None [] Sanitary sewer [] Underground storage tanks [] Above ground storage tanks [] Retail food facility [] Other

Is the facility covered under a storm water permit? [] Does not need coverage [] Individual [] No, but may need to be (Refer to Water Board staff) [] General: Does the facility have a SWPPP? [] yes [] no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Actual Discharge, NSW. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, Other (describe):

COMMENTS/REMARKS/REQUIREMENTS Structural control present [] Maintenance required in storm drain system [] yes [] no

- Oil was sitting under the generator needs to wipe out or remove. Re-inspect on 1/10/2012 - Recommend to place a spill kit place in the facility.

[] See attached for more comments. PRIORITY ROUTINE INSPECTION: [x] High - Annual [] Medium - every 2 yrs. [] Low - every 5 yrs. [] Referred to: ENFORCEMENT LEVELS: [] None [x] Verbal Warning [] Warning Notice or Admin. Action [] Admin. Action [] Legal Action [] Penalties &/or Cost Recovery Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? [] N/A [x] yes [] no or [x] see Follow-Up Inspection Report

Facility Representative: Ron Lechner Inspector: Jane Gardner

PR 0047883



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

San Mateo County Health System Environmental Health Services Division 2000 Alameda de las Pulgas, Suite 100, San Mateo, CA 94403 (650) 372-6200 Fax (650) 627-8244 WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name MPWD - Hallmark Pump Station Phone # 650-591-8241 Business Address 2843 Hallmark Dr. City Belmont Inspector Max Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

- 1. Correct the violations noted on the Stormwater Inspection Report dated 1/10/2012. 2. Note the Corrective Actions Taken in the Table provided. 3. Sign the certification below and retain yellow copy for your records. Return the signed original white copy of this Minor Violation - Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

Table with 2 columns: ACTIVITY AREAS and Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas (inside), Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, and Other (describe):

CERTIFICATION

With respect to the foregoing violations, I state that:

- 1. The business has corrected the violations cited above and on the Stormwater Inspection Report. 2. I have personally examined any attached documentation to establish that the violations have been corrected. 3. I believe that any information attached is true, accurate and complete. 4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: Ron Leithner Printed: Ron Leithner Date: 1/10/12

PRO040342



SAN MATEO COUNTYWIDE Water Pollution Prevention Program

Clean Water. Healthy Community.

San Mateo County Health System Environmental Health Services Division 2000 Alameda de las Pulgas, Suite 100, San Mateo, CA 94403 (650) 372-6200 Fax (650) 627-8244 WWW.FLOWSTOBAY.ORG

ROJINE INSPECTION REPORT

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Auto Way Repair Center Phone # 650-551-1188
Business Address 701 Harbor Blvd. City Belmont
Inspector Jase Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

- 1. Correct the violations noted on the Stormwater Inspection Report dated 12/1/11
2. Note the Corrective Actions Taken in the Table provided.
3. Sign the certification below and retain yellow copy for your records. Return the signed original white copy of this Minor Violation - Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

Table with 2 columns: ACTIVITY AREAS and Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, and Other (describe):

CERTIFICATION

With respect to the foregoing violations, I state that:

- 1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: [Signature] Printed: MICHAEL LIAO Date: 12-1-11



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
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Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
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220039151

POINT
INSPECTION REPORT
MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Western Grinding Inc. INC. Phone # 650-591-2695
Business Address 601 Harbor Blvd City Piedmont
Inspector Paul Gardner Inspector's email mgardner@co.sanmateo.ca.us

- Instructions:**
1. Correct the violations noted on the Stormwater Inspection Report dated 12/1/11
 2. Note the Corrective Actions Taken in the Table provided.
 3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation - Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

ACTIVITY AREAS	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	*there is couple of 55 drums of used oil but it was ^{outside} stored in the proper drums with the tops on it.
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	*Outdoor equipment has been properly maintained and sweeping looks cleaned.
E. Outdoor Parking Areas and Access Roads	*the waste storage tank was checked regularly and well maintained. there is a weep (rain) from beneath the container but it was
F. Outdoor Wash Areas	rectify and removed by job Brindle to keep it cleaned.
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	Minor violations has been corrected and these violations will be closed.

CERTIFICATION

- With respect to the foregoing violations, I state that:
1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
 2. I have personally examined any attached documentation to establish that the violations have been corrected.
 3. I believe that any information attached is true, accurate and complete.
 4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: *Rob Brindle* Printed: Rob Brindle Date: 12-1-11



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 12/21/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: European & Asian Auto Service SITE ADDRESS: 150 Old County Road
 CONTACT NAME: Nick Braoje PHONE: 650-592-8057 BUSINESS TYPE/ACTIVITY: Auto Repair SIC: _____
 Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____
 Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas	<input checked="" type="checkbox"/>				
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		1	0		corrected the problem during my visit; disposed the trash. was cleaned during my visit
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

owner concerned the water was on the street and it's been there for so many months and owner doesn't know where the water was coming from.
No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Gardner, Mal
 L:\Open\Hazmat\Admin\Current Forms\Stormwater_20101020



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

PR0052750

City: Belmont Unincorporated
Date: 12/14/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Quality Striping, Inc. SITE ADDRESS: 610 Mountain View Ave

CONTACT NAME: Daniel Monares employee PHONE: 650-5770200 BUSINESS TYPE/ACTIVITY: Painting Contractor SIC: _____
Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____
Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	/				<u>Bumper wheel stop was placed outside and was organized. pallets empty container can, trash at outdoor areas has been removed during my visit</u>
B. Outdoor Material Storage Areas		1	0		
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		1	0		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	/				
G. Rooftop Equipment	/				
H. Outdoor Drainage from Indoor Areas	/				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

there's no violation during my visit

See attached for more comments.
PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:
Businesses with a follow-up/re-inspection should be assigned High 2 yrs.
ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action
Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Daniel Monares Inspector: Maie Gardner
L/Open/Hazmat/Admin/CurrentForms/Stormwater_20101020



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Petaluma Unincorporated
 Date: 12/14/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Abel MacLinning SITE ADDRESS: 539 Mountain View Ave

CONTACT NAME: Abel Guendulain PHONE: 650-582-5407 BUSINESS TYPE/ACTIVITY: Machine Shop SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	/				
B. Outdoor Material Storage Areas	/				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	/				
E. Outdoor Parking Areas and Access Roads	.	1	0		
F. Outdoor Wash Areas	/				
G. Rooftop Equipment	/				
H. Outdoor Drainage from Indoor Areas	/				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

Businesses with a follow-up/re-inspection should be assigned High 2 yrs.

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Mae Gardner

1/Open/Hazmat/Admin/Current/Perms/Stormwater_2010/020



PR 0040347

SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 12/14/11 Standard Stormwater Facility Inspection Report Form

Reason for Inspection: [] First Inspection [x] Routine Inspection [] Response to Complaint [] Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Micatec Inc. SITE ADDRESS: 617 Mountain View Ave.

CONTACT NAME: Michael R. Kuhn PHONE: 650-592-2318 BUSINESS TYPE/ACTIVITY: Machine Shop SIC:

Pollutants of Concern Used at Facility? [] yes [] no If yes, indicate which ones: [] PCBs [] Mercury [] Copper [] Other

Is the facility covered under any other programs or permits? (Check all that apply.) [] Air quality [] Fire department (hazmat storage) [] Hazmat business plan [] Hazmat waste generator [] None [] Sanitary sewer [] Underground storage tanks [] Above ground storage tanks [] Retail food facility [] Other

Is the facility covered under a storm water permit? [x] Does not need coverage [] No, but may need to be (Refer to Water Board staff) [] Individual [] General: Does the facility have a SWPPP? [] yes [] no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, Other (describe):

COMMENTS/REMARKS/REQUIREMENTS Structural control present [] Maintenance required in storm drain system [] yes [] no

There's no violation observed during my visit

[] See attached for more comments.

PRIORITY ROUTINE INSPECTION: [] High - Annual [x] Medium - every 2 yrs. [] Low - every 5 yrs. [] Referred to: ENFORCEMENT LEVELS: [x] None 1. [] Verbal Warning 2. [] Warning Notice or Admin. Action 3. [] Admin. Action with Penalty &/or Cost Recovery 4. [] Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? [] N/A [] yes [] no [] see Follow-Up inspection Report

Facility Representative: [Signature] Inspector: [Signature]

PK# 0055238

✓



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 12/28/11 Standard Stormwater Facility Inspection Report Form

Reason for inspection: [] First Inspection [x] Routine Inspection [] Response to Complaint [] Follow-up Follow-up / Re-inspection Due:

NAME OF FACILITY: Auto Solutions SITE ADDRESS: 1302 Old County Road CONTACT NAME: PHONE: BUSINESS TYPE/ACTIVITY: Auto Repair SIC: 811

Pollutants of Concern Used at Facility? [] yes [] no If yes, indicate which ones: [] PCBs [] Mercury [] Copper [] Other

Is the facility covered under any other programs or permits? (Check all that apply.) [] Air quality [] Fire department (hazmat storage) [] Hazmat business plan [] Hazmat waste generator [] None [] Sanitary sewer [] Underground storage tanks [] Above ground storage tanks [] Retail food facility [] Other

Is the facility covered under a storm water permit? [] Does not need coverage [] Individual [] No, but may need to be (Refer to Water Board staff) [] General Does the facility have a SWPPP? [] yes [] no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, Potential (PTNL), Effectiveness (BMP), Actual Discharge (NSW), and Check box for educational outreach material. Rows include A. Outdoor Process/Manufacturing Areas, B. Outdoor Material Storage Areas, C. Outdoor Waste Storage/Disposal Areas, D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, E. Outdoor Parking Areas and Access Roads, F. Outdoor Wash Areas, G. Rooftop Equipment, H. Outdoor Drainage from Indoor Areas, I. Other (describe):

Advertisement for BIG Dave's Garage Maintenance & Repair. Formerly Auto Solutions. 1302 Old County Road Belmont, CA 94002. Tel: 650.592.1800 Fax: 650.592.1806 dave@bigdavesgaragesite.com www.bigdavesgaragesite.com Dave Owner

COMMENTS/REMARKS/REQUIREMENTS Structural control present [] Maintenance required in storm drain system [] yes [] no

This business was closed according to the new owner "Dave". The auto shop was replaced by "BIG DAVE'S GARAGE". The new owner Dave just started this business 9 mos. ago.

[] See attached for more comments.

Table with columns: PRIORITY ROUTINE INSPECTION (High, Medium, Low), ENFORCEMENT LEVELS (Verbal Warning, Warning Notice, Admin. Action, Legal Action), and Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner?

Facility Representative: Inspector: Mae Gardner



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 12/14/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY Orsborn Machining SITE ADDRESS 525 Mountain View Ave

CONTACT NAME _____ PHONE _____ BUSINESS TYPE/ACTIVITY Machining Shop SIC _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial PTNL	Effect- iveness BMP	Actual Discharge NSW	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas					
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Went able to conduct the routine inspection due the business closed per their neighbors feedback (Viri bldg # 513 and Michael - bldg # 617)

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: _____ Inspector: Maie Gardner

PR 0040321



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 12/28/11 Standard Stormwater Facility Inspection Report Form

Reason for inspection: [] First Inspection [X] Routine Inspection [] Response to Complaint [] Follow-up [] Follow-up / Re-inspection Due:

NAME OF FACILITY: Hunter's Auto and Truck Repair SITE ADDRESS: 800 Old County Road CONTACT NAME: Mike Struck PHONE: 650-591-7002 BUSINESS TYPE/ACTIVITY: Auto Repair SIC: 81C

Pollutants of Concern Used at Facility? [] yes [] no If yes, indicate which ones: [] PCBs [] Mercury [] Copper [] Other

Is the facility covered under any other programs or permits? (Check all that apply.) [] Air quality [] Fire department (hazmat storage) [] Hazmat business plan [] Hazmat waste generator [] None [] Underground storage tanks [] Retail food facility [] Sanitary sewer [] Above ground storage tanks [] Other

Is the facility covered under a storm water permit? [X] Does not need coverage [] Individual [] No, but may need to be (Refer to Water Board staff) [] General: Does the facility have a SWPPP? [] yes [] no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW, and a checkbox for educational outreach material. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, and Other (describe):

COMMENTS/REMARKS/REQUIREMENTS Structural control present [] Maintenance required in storm drain system [] yes [] no

Auto Repair shop was very cleaned, trash and waste was properly disposed in the 55 gallon drum. No observations observed during my visit

[] See attached for more comments.

PRIORITY ROUTINE INSPECTION: [] High - Annual [X] Medium - every 2 yrs. [] Low - every 5 yrs. [] Referred to:

ENFORCEMENT LEVELS: [X] None 1. [] Verbal Warning 2. [] Warning Notice or Admin. Action 3. [] Admin. Action with Penalty &/or Cost Recovery 4. [] Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? [] N/A [] yes [] no or [] see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Mike Gardner



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

PR 0054932

City: Pedmont Unincorporated
Date: 12/28/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due:

NAME OF FACILITY: Thega Solutions SITE ADDRESS: 1404 Old County Rd.

CONTACT NAME: Lee Perowner PHONE: 650-517-0200 BUSINESS TYPE/ACTIVITY: PRINTSHOP SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____
 Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Potent- tial PTNL	Effect- iveness BMP	Actual Discharge NSW	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
A. Outdoor Process/Manufacturing Areas	✓				
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):	✓				

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Disposal area where the trash and Bin (Recycling) Bin located was cleaned.
There's no violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

Businesses with a follow-up/re-inspection should be assigned High

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Lee R. Berwinn Inspector: Mae Gardner

PR 0051558



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 10/28/11

Reason for Inspection: Routine Inspection

NAME OF FACILITY: Wood Service Center SITE ADDRESS: 844 Old County Road

CONTACT NAME: Herbert Wood PHONE: 650-598-9417 BUSINESS TYPE/ACTIVITY: Auto Repair

Pollutants of Concern Used at Facility? no

Is the facility covered under any other programs or permits? (Check all that apply.)

Is the facility covered under a storm water permit? Does not need coverage

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Actual Discharge, NSW. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, etc.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system

No violations observed during my visit

PRIORITY ROUTINE INSPECTION: Medium - every 2 yrs. ENFORCEMENT LEVELS: Verbal Warning

Facility Representative: Gordon Wood Inspector: Mai Gardner

PR 0041579



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Redmont Unincorporated Date: 12/28/11 Food Haz Mat Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY Old County Deli SITE ADDRESS 991-A Old County Road

CONTACT NAME Cheryl and Nate PHONE 650-592-6276 BUSINESS TYPE/ACTIVITY Restaurant SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Fire department (hazmat storage) Hazmat business plan Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violation observed during my visit; it was cleaned and disposed the trash, compost and recycling in a proper manner.

See attached for more comments. PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to: ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Michael

Inspector: Mae Gardner

PK 004 195 1



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 12/21/11 Standard Stormwater Facility Inspection Report Form

Reason for Inspection: [] First Inspection [x] Routine Inspection [] Response to Complaint [] Follow-up Follow-up / Re-inspection Due:

NAME OF FACILITY: MPWD Hanibal Pump Station SITE ADDRESS: 1500 Rakston Ave

CONTACT NAME: Ron Leithner PHONE: (650) 591-8999 BUSINESS TYPE/ACTIVITY: MPWP Pump Station SIC:

Pollutants of Concern Used at Facility? [] yes [x] no If yes, indicate which ones: [] PCBs [] Mercury [] Copper [] Other

Is the facility covered under any other programs or permits? (Check all that apply.) [] Air quality [] Fire department (hazmat storage) [] Hazmat business plan [] Hazmat waste generator [] None [] Retail food facility [] Sanitary sewer [] Above ground storage tanks [] Other

Is the facility covered under a storm water permit? [x] Does not need coverage [] Individual [] No, but may need to be (Refer to Water Board staff) [] General: Does the facility have a SWPPP? [] yes [] no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

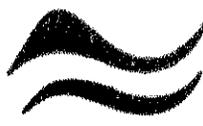
Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, etc.

COMMENTS/REMARKS/REQUIREMENTS Structural control present [] Maintenance required in storm drain system [] yes [] no

no violation observed

Form with sections: PRIORITY ROUTINE INSPECTION, ENFORCEMENT LEVELS, and Were violations corrected...

Facility Representative: Ron Leithner Inspector: Joe Gardner



PRO056175

SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 12/21/11 Standard Stormwater Facility Inspection Report Form

Reason for Inspection: [] First Inspection [x] Routine Inspection [] Response to Complaint [] Follow-up

NAME OF FACILITY: MWD Pump Station - West SITE ADDRESS: W. Ralston Ave / cross st. 2540 Belmont Canyon Road

CONTACT NAME: Ron Leitner PHONE: 650-541-8441 BUSINESS TYPE/ACTIVITY: SIC:

Pollutants of Concern Used at Facility? [] yes [] no If yes, indicate which ones: [] PCBs [] Mercury [] Copper [] Other

Is the facility covered under any other programs or permits? (Check all that apply.) [] Air quality [] Fire department (hazmat storage) [] Hazmat business plan [] Hazmat waste generator [] None [] Undergr. storage tanks [] Retail food facility [] Sanitary sewer [] Above ground storage tanks [] Other

Is the facility covered under a storm water permit? [x] Does not need coverage [] Individual [] No, but may need to be (Refer to Water Board staff) [] General: Does the facility have a SWPPP? [] yes [] no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effectiveness, Actual Discharge, NSW, and Follow-up Action Required. Rows include A. Outdoor Process/Manufacturing Areas, B. Outdoor Material Storage Areas, C. Outdoor Waste Storage/Disposal Areas, D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, E. Outdoor Parking Areas and Access Roads, F. Outdoor Wash Areas, G. Rooftop Equipment, H. Outdoor Drainage from Indoor Areas, I. Other (describe):

COMMENTS/REMARKS/REQUIREMENTS Structural control present [] Maintenance required in storm drain system [] yes [] no

no violation observed during my visit

See attached for more comments. PRIORITY ROUTINE INSPECTION: [] High - Annual [x] Medium - every 2 yrs. [] Low - every 5 yrs. [] Referred to: ENFORCEMENT LEVELS: [x] None [] Verbal Warning [] Warning Notice or Admin. Action [] Admin. Action with Penalty &/or Cost Recovery [] Legal Action Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? [] N/A [] yes [] no or [] see Follow-Up Inspection Report

Facility Representative: Ron Leitner

Inspector: [Signature]

PR 00-4573
4788 5



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
Clean Water. Healthy Community.

City: Belmont Unincorporated
Date: 12/21/2011 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
Follow-up / Re-Inspection Due:

NAME OF FACILITY: MPWD Dekoven Pump Station SITE ADDRESS: 2522 Dekoven Ave

CONTACT NAME: Ron Leithner PHONE: 650-591-8411 BUSINESS TYPE/ACTIVITY: MPWD pump station SIC: _____
Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas	<input checked="" type="checkbox"/>				
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas		1	0		
I. Other (describe):	<input checked="" type="checkbox"/>				

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

*Facility looks great and maintained the cleanliness at all time
No violation observed during my visit*

See attached for more comments.
PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Ron Leithner Inspector: Max Gardner



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 12/6/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up **Follow-up / Re-Inspection Due:**

NAME OF FACILITY Wheel Works SITE ADDRESS 120 El Camino Real

CONTACT NAME Detrick Sanders PHONE 650 592-9200 BUSINESS TYPE/ACTIVITY Tire Sales/Installation & Auto Repair SIC _____
 Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	✓				
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas			0		
E. Outdoor Parking Areas and Access Roads			0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):	✓				

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Found box in the top of 55 gallon drum and needs to be stored in the proper place.
No violation observed during my visit

See attached for more comments.
PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:
 Businesses with a follow-up/re-inspection should be assigned High None Verbal Warning Warning Notice or Admin. Action Admin. Action with Penalty &/or Cost Recovery Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: [Signature]
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PR00 40326

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 12/10/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY One Hour Cleaners SITE ADDRESS 1412 El Camino Real

CONTACT NAME _____ PHONE 650-591-9782 BUSINESS TYPE/ACTIVITY _____ SIC _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	PTNL	Effect-iveness BMP	Actual Discharge NSW	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas					
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Business closed

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual Businesses with a follow-up/re-inspection should be assigned High	<input type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery
			4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: _____ Inspector: Mae Gardner
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PRO040295

SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water, Healthy Community.

City: Belmont Date: 12/6/11 Standard Stormwater Facility Inspection Report Form

Reason for Inspection: Routine Inspection Follow-up / Re-Inspection Due:

NAME OF FACILITY: U-Haul Central Belmont SITE ADDRESS: 654 El Camino Real

CONTACT NAME: Eugene Morillos PHONE: 650-582-4096 BUSINESS TYPE/ACTIVITY: Rental Equipment Storage SIC:

Pollutants of Concern Used at Facility? PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? Air quality Fire department Hazmat business plan Hazmat waste generator

Is the facility covered under a storm water permit? Does not need coverage Individual General Does the facility have a SWPPP?

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, Other (describe).

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system

No violation observed during my visit

PRIORITY ROUTINE INSPECTION: Medium - every 2 yrs. ENFORCEMENT LEVELS: None

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner?

Facility Representative: [Signature]

Inspector: [Signature]



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Pelmont Unincorporated
 Date: 12/6/2011 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: German Auto Kraft SITE ADDRESS: 700 Harbor Blvd

CONTACT NAME: Jeanine Klopocki PHONE: 650-595-2777 BUSINESS TYPE/ACTIVITY: Auto Repair SIC:
 Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other
 Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	/				
B. Outdoor Material Storage Areas	/				
C. Outdoor Waste Storage/Disposal Areas	/				
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		1	0		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	/				
G. Rooftop Equipment	/				
H. Outdoor Drainage from Indoor Areas		1	0		
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Everything's looks cleaned and the storm drain looks good. There's no violation observed during my visit.

See attached for more comments.
 PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:
 Businesses with a follow-up/re-inspection should be assigned High 2 yrs.
 ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action
 Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Mac Gardner
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SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water, Healthy Community.

PR 0040296 Belmont

City: Belmont Unincorporated

Date: 12/6/11 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due:

NAME OF FACILITY: Belmont Tires, Wheels & Services

SITE ADDRESS: 564 El Camino Real

CONTACT NAME: Stanley Fung

PHONE: 650592-9932

BUSINESS TYPE/ACTIVITY: Auto Repair, Tire Sales

SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer

Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks

Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s):
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	/				Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
B. Outdoor Material Storage Areas		1	0		
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	/				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	/				
G. Rooftop Equipment	/				
H. Outdoor Drainage from Indoor Areas	/				
I. Other (describe):	/				

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

NO violation observed during my visit; facility conducted business on efficient manner, cleaned and organized to where they stored their used motor oil & filters.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None <input type="checkbox"/> 1. Verbal Warning <input type="checkbox"/> 2. Warning Notice or Admin. Action <input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery <input type="checkbox"/> 4. Legal Action	

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative:

Inspector:

DP0051645

**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

City: Belmont Unincorporated
Date: 12/6/2011 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY 5 Star Auto Service Center SITE ADDRESS 1444 El Camino Real

CONTACT NAME Ned Patterson PHONE 6505951200 BUSINESS TYPE/ACTIVITY Auto Repair SIC _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas		1	0		
B. Outdoor Material Storage Areas		1	0		
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	/				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	/				
G. Rooftop Equipment	/				
H. Outdoor Drainage from Indoor Areas	/				
I. Other (describe):	/				

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

*Everything was cleaned and organized
Tire was properly in placed and Trash was
disposed in the proper container
No violation observed.*

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs.		<input type="checkbox"/> Referred to:	
Businesses with a follow-up/re-inspection should be assigned High			
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery
		4. <input type="checkbox"/> Legal Action	

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] 12/6/11 Inspector: [Signature]
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**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**

Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 10/13/11 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up **Follow-up / Re-Inspection Due:**

NAME OF FACILITY: Belmont Kwik Serv. SITE ADDRESS: 701 Harbor Blvd.

CONTACT NAME: Rajesh PHONE: 591-3633 BUSINESS TYPE/ACTIVITY: 3090 SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer

Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks

Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas					
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

map water discharged via toilet
no signs of outside discharge noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None Verbal Warning Warning Notice or Admin. Action Admin. Action with Penalty &/or Cost Recovery Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: Brams Inspector: BRENT GUTER



PRO041594

**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 12/8/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Carlmont High School SITE ADDRESS: 1400 Alameda De Las Pulgas
CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		2	1		Garbage / Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads		1	1		Parking Lot
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None Verbal Warning Warning Notice or Admin. Action Admin. Action with Penalty &/or Cost Recovery Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: _____ Inspector: Brent Guier

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STORMWATER INSPECTIONS & VIOLATIONS SUMMARY

Municipality: Belmont
 Period Covered by this Report: January 1 through March 31, 2012
 Period Covered by the Previous Report: Oct 1 through December 31, 2011
 Date: 23-Apr

Total Number of Inspections:	18	23
Total Number of Violations:	7	0
Total Follow-up Actions:	7	0
Total Violations Corrected:	7	0
Total Violations Pending:	0	0

NAME TYPE OF BUSINESS	ADDRESS	VIOL. DATE	INSP	TYPES OF VIOLATIONS		COMMENTS AND/OR DESCRIPTION OF VIOLATION	ENFORCEMENT ACTIONS					FOLLOW-UP ACTION	NS CORRECTED (YES/NO)	DATE CORRECTED	
				PTNL + BMP ≥ 4	NSW		NONE	VW	WN	AS	LA				
Lasky Trade Printing, 240 Harbor Blvd		21-Dec	MG	No	No	Manufacturing area needs organizing, empty boxes to go in recycling bin. Disposal area needs to be swept, empty boxes & trash removed.		*					Yes	Y	1/18/2012
Lasky Trade Printing, 240 Harbor Blvd		18-Jan	MG	No	No	Facility has been swept, organized. Trash, recycling disposed of properly. Violation has been closed.		*					No	Na	Na
Auto Scientific, 1140 Old County Rd		28-Dec	MG	Yes	No	Trash, cardboard needs to be properly disposed of. Facility floor needs to be swept and trash removed.		*					Yes	Yes	1/18/2012
Auto Scientific, 1140 Old County Rd		11-Jan	MG	No	No	Trash disposed of properly, facility swept. Violation closed.		*					No	Na	Na
US Auto Body & Paint, 461 Harbor Rd		4-Jan	MG	Yes	NO	Sewer clogged with trash/cardboard. Dripping gasoline & oil in outdoor shop. Water from clogged sewer in outdoor wash area.		*					Yes	Y	1/18/2012

US Auto Body & Paint, 461 Harbor Rd	4-Jan	MG	NO	No	Sewer working properly, trash removed of properly, gasoline and oil removed amd cleaned, area swept.Violation has been closed.	*						No	Na	Na
Auto Masters, 505 O'Neill Ave	10-Jan	MG	Yes	No	Trash, cardboard, cans bottles inside& outside facility needs proper disposal. Items on top of flammable containers need to be removed. Waste drum needs to be labeled. Water overflowing by entance from neighbor.	*						Yes	Yes	1/18/2012
Auto Masters, 505 O'Neill Ave	10-Jan	MG	No	No	Facility looks great. All trash has been properly diposed of, empty boxes in recylce, flammable stockroom has been swept and organized. Violations have been cleared.	*						No	Na	Na
The Raiser Organization, 20 Davis Dr	10-Jan	MG	Yes	no	Trash needs to be removed and disposed properly by the cage.	*						Yes	Yes	1/18/2012
The Raiser Organization, 20 Davis Dr	18-Jan	MG	No	No	Trash removed, Cage area looks cleaned, violation cleared.	*						No	Na	Na
A Travis 76, 699 Ralston Ave	25-Jan	MG	Yes	No	Found 4 55 gal drums by trash inside cage. One drum is uncovered and has used contaminated motor oil w/o the label. Please cover drum or properly dispose of it. Found abandoned 5 gal container of used contaminated oil outside the recycling bin, needs to be disposed of properly. Housekeeping needs to improve inside the shop & by trash in cage area.						*	Yes	Yes	2/1/2012

Travis 76, 699 Ralston Ave	1-Feb	MG	No	No	Improved housekeeping by trash cage area. Abandoned waste motor oil has been removed. Two 55 gal drum of used motor oil has been picked up by trailer. Violations have been closed. There are still a couple of 55 gal drums that need to be properly labeled and picked up by hauler within 90 days.	*						No	Na	Na
SBSABelmont Pump Station, 1385 Shoreway Rd	1-Feb	MG	Yes	No	Housekeeping needs to be improved, trash, universal waste needs to be removed in the facility; influent pump that was leaking needs to be repaired.	*						Yes	Yes	2/22/2012
SBSABelmont Pump Station, 1385 Shoreway Rd	22-Feb	MG	No	No	Housekeeping has been improved, organized, universal waste has been removed. Leaking Influent pump has been repaired. Violation has been closed.	*						No	Na	Na

Type of Violation:

PTNL + BMP ≥ 4
NSW Non-Stormwater Discharge

If the combined value of high potential for a Pollutant Discharge plus poor BMPs equals 4, Follow-up Action is required Discharge of non-stormwater materials to storm drain system. Non-stormwater discharges are allowed by the NPDES permit as conditionally exempted should not be identified as a NSW violation.

Enforcement Actions:

None No Action Taken
VW Verbal Warning
WN Warning Notice

AA\$ Admin. Action with Penalty
LA Legal Notice



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PROJ 54580

City: Belmont Unincorporated
 Date: 1/25/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-inspection Due: 2/1/2012

NAME OF FACILITY: Travis 76 SITE ADDRESS: 699 Ralston Ave

CONTACT NAME: Jon Greco / Antonio Gutierrez PHONE: 650-378-9771 BUSINESS TYPE/ACTIVITY: Gasoline station / Energy SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas		2	2		- 4 of 55 gallon drums; one of the drum has no cover on it + has a used motor oil contaminated. Please label the drums if you use for storing the motor oil (used).
C. Outdoor Waste Storage/Disposal Areas		1	1		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		1	0		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

- Found 4 of 55 gal drums by the trash inside the cage. One of the drum has used motor oil without the label (used contaminated oil), it was no cover on it. Please cover the open drum or properly dispose since it's full.
 - Found abandonment 5 gal of used contaminated oil outside the recycling bin and needs to be disposed properly. Housekeeping needs to improve inside the shop & by the trash where the cage area.

See attached for more comments. **NOTE: Violation fee will be assessed if you are not going to rectify.**

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:			
Businesses with a follow-up/re-inspection should be assigned High			
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input checked="" type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery
		4. <input type="checkbox"/> Legal Action	

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Mae Gardner

PR 00 54580



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
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San Mateo County Health System
Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Travis 76 Phone # 650-598-9771
Business Address 603 Palstan Ave City Belmont
Inspector Mae Gardner Inspector's email mgardner@co.sanmateo.ca.us

- Instructions:**
1. Correct the violations noted on the Stormwater Inspection Report dated 2/1/2012
 2. Note the Corrective Actions Taken in the Table provided.
 3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<u>Improved the housekeeping by trash cage area. Abandoned waste motor oil has been removed</u>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	<u>7 Couple of drums (55 gallon) of use motor oil has been picked up by the hauler that I have provided to the city.</u>
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	<u>0 Violations has been closed</u>
I. Other (describe):	<u>There's still couple of 55 gallon drums with used motor oil that needs to be picked by the hauler with proper labels</u>

CERTIFICATION

- With respect to the foregoing violations, I state that: Note: needs to be picked up in 9 days
1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
 2. I have personally examined any attached documentation to establish that the violations have been corrected.
 3. I believe that any information attached is true, accurate and complete.
 4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature [Signature] Printed: Jen Greco Date: 2/1/12



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

P120054363

City: Piedmont Unincorporated
Date: 1/10/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
Follow-up / Re-Inspection Due: 1/17/12

NAME OF FACILITY: The Kaiser Organization SITE ADDRESS: 20 Davis Dr.

CONTACT NAME: Gino Chiappe PHONE: 650-280-0284 BUSINESS TYPE/ACTIVITY: Commercial Real Estate SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s); Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		2	0		Trash needs to be removed & disposed properly
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Trash needs to be removed and disposed properly by the cage (checking oil drain)

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input checked="" type="checkbox"/> High - Annual <input type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None <input checked="" type="checkbox"/> 1. Verbal Warning <input type="checkbox"/> 2. Warning Notice or Admin. Action <input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery <input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Maie Gardner



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
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PR0054363

San Mateo County Health System
Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name The Raiser Organization Phone # 650-280-0284
Business Address 20 Davis Dr City Belmont
Inspector Mike Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated _____
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<i>Trash has been removed and cage are looks cleaned.</i>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<i>- Violation has been closed.</i>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: T. Simi Printed: T. Simi Date: 1-18-12



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 1/10/2012 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due: 1/18/2012

NAME OF FACILITY: Auto Masters SITE ADDRESS: 505 O'Neill Ave

CONTACT NAME: George Gudino / Candido Valencia PHONE: 650 669-1097 BUSINESS TYPE/ACTIVITY: Autobody Shop SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit?
 Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		3	2		sweep and dispose the trash, empty bottle cans and cardboard. (inside + outside facility)
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		3	2		Found tons of items from the outdoor needs to organize (lamps, metals, etc)
E. Outdoor Parking Areas and Access Roads		2	1		remove the items that's blocking from the access road; pls. do not park your vehicle.
F. Outdoor Wash Areas		2	1		needs to sweep and clean; organize the auto parts
G. Rooftop Equipment	<input checked="" type="checkbox"/>				Facility wash their vehicle but I couldn't locate the sewer.
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					Do not store any items on the top of the drum (hazardous waste)

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Facility needs to swept, organize the autoparts, dispose the trash, cardboard, empty cans and bottles inside/outside the facility properly.

All plannable containers - please remove all the items on the top. Hazardous waste drum need to label properly.

Sofa outside the facility needs to remove ^{if possible} and trash by the entrance vehicle ^{needs to remove.}

Found water was overflowing by the entrance. George stated that it was coming from the neighbor that has a days violation will be assessed if facility won't rectify ^{the matter.}

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

Businesses with a follow-up/re-inspection should be assigned High 2 yrs.

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: CVL

Inspector: Mae Gardner



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

PR0046771

San Mateo County Health System
Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Auto Masters Phone # 650-669-1097
Business Address 505 O'Neill Ave City Belmont
Inspector Mal Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 1/18/2012
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	Facility looks great! organized, removed the trash, recycling boxes and stored in the proper disposal Flammable stockroom has been swept and organized
C. Outdoor Waste Storage/Disposal Areas	
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	- Violation has been closed

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

(Handwritten signature/initials)

Signature: [Handwritten Signature] Printed: George Gudino Date: 1-18-2012



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0048709

City: Belmont Unincorporated

Date: 1/4/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due: 1/17/12

NAME OF FACILITY: US Auto Body and Paint SITE ADDRESS: 461 Harbor

CONTACT NAME: Anthony Singh PHONE: _____ BUSINESS TYPE/ACTIVITY: Auto Repair SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		3	2		Found the sewer was clogged trash/cardboard need to be disposed properly. Found dumping gasoline in outdoor shop needs to be cleaned, and dispersed, the absorbent mat, etc. in the drain/containers. -sewer area needs to be cleaned & repaired; it was bunch of water overflowing/clogged
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		3	2		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas		3	2		
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas		2	1		
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Violation fee will be assessed if the violation stormwater in the facility (outside/inside) not taking care of. Re-inspect on 1/17/2012

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input checked="" type="checkbox"/> High - Annual <input type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:	
ENFORCEMENT LEVELS: <input type="checkbox"/> None <input checked="" type="checkbox"/> Verbal Warning <input type="checkbox"/> Warning Notice or Admin. Action <input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery <input type="checkbox"/> 4. Legal Action	

Were violations corrected ≤ 10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative:

Inspector: Traci Gardner

PROD48709

✓



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
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Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name US Auto Body and Paint Phone # 650-592-1508
Business Address 464 Harbor City Belmont
Inspector Mae Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 1/18/2012
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	
C. Outdoor Waste Storage/Disposal Areas	<p>- has been swept, organized and properly stored/removed the trash. - sewer's working properly. - According to the owner Dorothy Thuler trash will come & pick up their garbage every Wednesday.</p>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<p>- Ramped/cleaned the gasoline that was spilled/dripping in the ground. - Violation has been closed.</p>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: SSingh

Printed: Dorothy Singh

Date: 1-18-12



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR 004033A

City: Belmont Unincorporated
 Date: 12/28/11 Food Haz. Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due: 1/11/2012

NAME OF FACILITY: Auto Scientific SITE ADDRESS: 1140 Old County Road

CONTACT NAME: Tony Guinasso PHONE: 650-592-2869 BUSINESS TYPE/ACTIVITY: Auto Repair Shop SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas		2	0		
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		2	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

trash, cardboard needs to be properly disposed and facility floor needs to be swept and remove the trash on the ground.
Re-inspected on 1/11/2012

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input checked="" type="checkbox"/> High - Annual <input type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None <input checked="" type="checkbox"/> Verbal Warning <input type="checkbox"/> Warning Notice or Admin. Action <input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery <input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: Tony Guinasso

Inspector: Mal Gardner

PR 0040334



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
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San Mateo County Health System
Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Auto Scientific Phone # 650-592-2869
Business Address 1140 Old County Road City Belmont
Inspector Mae Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 1/18/2012
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	<i>Facility has been swept, organized, removed the trash and disposed properly</i>
C. Outdoor Waste Storage/Disposal Areas	
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<i>- Violation has been closed</i>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: Anthony E. Guinan Printed: Anthony Guinan Date: 1.18.12



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

PR 0051825

City: Belmont Unincorporated
Date: 12/21/11 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
Follow-up / Re-Inspection Due: 1/18/12

NAME OF FACILITY: Losky Trade Printing SITE ADDRESS: 240 Harbor Blvd

CONTACT NAME: P.J. Hawkins / Larry PHONE: 650-592-7177 BUSINESS TYPE/ACTIVITY: Printing Company SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas		2	0		<i>Manufacturing area needs to organize the boxes (empty) needs to store in the recycling bin.</i>
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		2	0		<i>need to sweep and clean the area empty boxes trash needs to remove</i>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				
E. Outdoor Parking Areas and Access Roads	✓		0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):	✓				

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

*Business still on the process of renovation, found empty boxes by the 55 gallon drum where they stored their waste. Manufacturing area needs to sweep, organize and clean after their renovation. Mr. P.J. stated, it should be done for couple of weeks or so to complete the renovation
Follow-up on 1/18/12*

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input checked="" type="checkbox"/> High - Annual	<input type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High			
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input checked="" type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery
			4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up inspection Report

Facility Representative: Larry Duling Inspector: Mae Gardner



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

San Mateo County Health System
Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

PR 00 51825

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name Lasky Trade Printing Phone # 650-592-7177
Business Address 240 Harbor Blvd City Delmont
Inspector Mal Gardner Inspector's email mgardner@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 1/18/2011
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	<i>Facility has been swept, organized and disposed the trash recycling in the proper disposal area. Boxes on the top of the 55 gallon waste drum has been removed.</i>
C. Outdoor Waste Storage/Disposal Areas	
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	<i>- Violation has been closed -</i>

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: *P.J. Hawkins* Printed: P.J. HAWKINS Date: 1/18/12



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0040707

City: Belmont Unincorporated

Date: 2/1/2012 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due: 2/8/2012

NAME OF FACILITY: SOSA Belmont Pump Station SITE ADDRESS: 1985 Shoreway Road

CONTACT NAME: Norm Domingo PHONE: 832-6640 BUSINESS TYPE/ACTIVITY: Pump Station/Diesel Generator SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer

Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks

Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas <u>(inside)</u>		2	2		<u>Housekeeping needs to be improved; universal waste needs to remain in the chain, rake, shovel and rug needs to be organized</u> <u>2. Influent Pump that was leaking needs to be repaired</u>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas <u>(inside)</u>		2	2		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

- Housekeeping needs to be improved, trash, universal waste needs to remain in the facility; Influent pump that was leaking needs to be repaired.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input checked="" type="checkbox"/> High - Annual <input type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None <input checked="" type="checkbox"/> Verbal Warning <input type="checkbox"/> Warning Notice or Admin. Action <input type="checkbox"/> Admin. Action <input type="checkbox"/> Legal Action <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: M Domingo
 I/Open/Hazmat/Admin/Current/Forms/Stormwater_20101020

Inspector: Mae Gardner

PR0040303



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

San Mateo County Health System
Environmental Health Services Division
2000 Alameda de las Pulgas, Suite 100,
San Mateo, CA 94403
(650) 372-6200 Fax (650) 627-8244
WWW.FLOWSTOBAY.ORG

MINOR VIOLATION - RETURN TO COMPLIANCE

Avoid a re-inspection fee by correcting minor violations & submitting this completed form within 5 days.

Business Name MSA Belmont Pump Station Phone # _____
Business Address 1785 Shoreway Road City Belmont
Inspector Mike Anderson Inspector's email mja@co.sanmateo.ca.us

Instructions:

1. Correct the violations noted on the Stormwater Inspection Report dated 2/22/12
2. Note the Corrective Actions Taken in the Table provided.
3. **Sign** the certification below and **retain** yellow copy for your records. **Return the signed original** white copy of this Minor Violation – Return to Compliance form to San Mateo County Environmental Health at the address shown above or via email to the inspector.

<u>ACTIVITY AREAS</u>	Corrective Actions Taken: Describe Corrective actions taken. Attach photos, receipts or other documentation, if applicable
A. Outdoor Process/Manufacturing Areas	
B. Outdoor Material Storage Areas	Housekeeping has been improved organized, removed the universal waste inside the facility.
C. Outdoor Waste Storage/Disposal Areas	
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	
E. Outdoor Parking Areas and Access Roads	Influent Pump that was leaking has been fixed
F. Outdoor Wash Areas	
G. Rooftop Equipment	
H. Outdoor Drainage from Indoor Areas	
I. Other (describe):	- Violation has been closed -

CERTIFICATION

With respect to the foregoing violations, I state that:

1. The business has corrected the violations cited above and on the Stormwater Inspection Report.
2. I have personally examined any attached documentation to establish that the violations have been corrected.
3. I believe that any information attached is true, accurate and complete.
4. I am aware that there are penalties for submitting false information and / or not correcting violations noted.

I declare under penalty of perjury, that the foregoing certification is true and correct.

Signature: [Signature] Printed: Dominigo Date: 2/22/12

PR 120209



SOUTH BAYSIDE SYSTEM AUTHORITY

JOINT POWERS AUTHORITY ————— *A Public Entity*

1400 Radio Road • Redwood City, California 94065-1220
Main 650/591-7121 • Fax 650/591-7122

- City of Belmont
- City of Redwood City
- City of San Carlos
- West Bay Sanitary District

February 9, 2012
File No. 81-45.01

Mae Gardner
Pollution Prevention Program
Environmental Health Services Division
San Mateo County Health System
2000 Alameda De Las Pulgas, Suite 100
San Mateo, CA 94403

Subject: Response to 2/1/12 South Bayside System Authority, Belmont Pump Station Stormwater Inspection

Dear Ms. Gardner,

The purpose of this letter is to respond to the comments listed on the Standard Stormwater Facility Inspection Report Form dated 2/1/12.

South Bayside System Authority, SBSA, takes regulatory compliance with local, state and federal regulations very seriously. As part of the follow up for this inspection a meeting to address inspection comments was held with the SBSA Safety Manager, a SBSA Maintenance Department Supervisor and I.

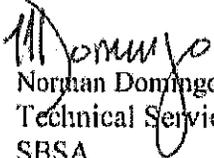
Standard Stormwater Inspection Form Comments:

- 1) Housekeeping needs to be improved, trash, universal waste needs to be removed in the facility.
- 2) Influent Pump that was leaking needs to be repaired.

Response:

- 1) A SBSA Operations and Maintenance Utility worker was sent to the Belmont Pump Station to clean and organize the facility, which included removing trash, organizing or removing tools and moving universal waste to the main plant universal waste collection area.
- 2) The leaking influent pump is being inspected by SBSA Maintenance staff and appropriate action will be taken. I must emphasize that this pump is at the bottom floor of the pump station at least 20 feet below ground level and any leakage is contained within a blind floor sump that pumps back to the influent channel of the pump station. The influent channel connects to SBSA. This water does not flow to the storm sewer.

Sincerely,


Norman Domingo
Technical Services Supervisor
SBSA
(650) 832-6240



PRO040297
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Redmond Unincorporated
 Date: 2/1/2022 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up **Follow-up / Re-Inspection Due:**

NAME OF FACILITY Custom Metal Mfg Co. SITE ADDRESS 606 Wattermire

CONTACT NAME Getard Mubwa PHONE 650-592-6412 BUSINESS TYPE/ACTIVITY Welding/Steel Fab SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violations observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High
ENFORCEMENT LEVELS: <input type="checkbox"/> None <input type="checkbox"/> Verbal Warning <input type="checkbox"/> Warning Notice or Admin. Action <input type="checkbox"/> Admin. Action <input type="checkbox"/> Penalty &/or Cost Recovery <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: [Signature]



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR 0040294

City: Piedmont Unincorporated

Date: 2/1/2012 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY: Bar One Manufacturing

SITE ADDRESS: 1201 Old County

CONTACT NAME: Patrick Ray - Staff

PHONE: 591-7045

BUSINESS TYPE/ACTIVITY: Machine Shop

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer

Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks

Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s):
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas	<input checked="" type="checkbox"/>				
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

facility dispose their own trash & recycling to the Ecology, San Carlos
No violations observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Patrick Ray

Inspector: Mae Gardner



PR0040299
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 1/25/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Empire Lumber Co SITE ADDRESS: 1201 Shoreway Road

CONTACT NAME: Steve Crabbs PHONE: (650) 592-7451 BUSINESS TYPE/ACTIVITY: Lumberyard & Supplies SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	✓				
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas		1	0		
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

Businesses with a follow-up/re-inspection should be assigned High

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Max Gardner



PR0047896
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 1/25/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-inspection Due:

NAME OF FACILITY: Jameco Electronics SITE ADDRESS: 1955 Shoreway Road

CONTACT NAME: George Rossi PHONE: 650-802-1578 BUSINESS TYPE/ACTIVITY: Electronic Parts Sales SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	✓				
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				
E. Outdoor Parking Areas and Access Roads	✓		0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Facility looks good and well-organized
all the parts/boxes in the warehouse/storerooms
no violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual Businesses with a follow-up/re-inspection should be assigned High		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None	<input type="checkbox"/> 1. Verbal Warning	<input type="checkbox"/> 2. Warning Notice or Admin. Action	<input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery	<input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: Ma Gardner



PR0040335

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
Clean Water. Healthy Community.

City: Belmont Unincorporated
Date: 1/25/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY: DG + E SITE ADDRESS: 1015 Shoreway Road

CONTACT NAME: Ango Jurado PHONE: 415-645-7511 BUSINESS TYPE/ACTIVITY: Electrical Substation SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

<input type="checkbox"/> Air quality	<input checked="" type="checkbox"/> Hazmat business plan	<input type="checkbox"/> None	<input type="checkbox"/> Sanitary sewer
<input type="checkbox"/> Fire department (hazmat storage)	<input type="checkbox"/> Hazmat waste generator	<input type="checkbox"/> Underground storage tanks	<input type="checkbox"/> Above ground storage tanks
		<input type="checkbox"/> Retail food facility	<input type="checkbox"/> Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas		1	0		
B. Outdoor Material Storage Areas		1	0		
C. Outdoor Waste Storage/Disposal Areas					
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):	<input checked="" type="checkbox"/>				<u>Site has SPC plan</u>

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

The substation has SPC plan w/ containment area to prevent off site discharge. No violations observed during my visit.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs.		<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action
	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: Mae Gardner



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR 0055246 Belmont

City: Belmont Unincorporated

Date: 1/18/2012 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /

Re-Inspection Due:

NAME OF FACILITY Fernando the Neat

SITE ADDRESS 130 #4 Old County Rd.

CONTACT NAME Fernando Franco

PHONE 650-591-4682

BUSINESS TYPE/ACTIVITY Painting Contractor

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)

- Air quality Hazmat business plan None Sanitary sewer
- Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
- Retail food facility Other

Is the facility covered under a storm water permit?

- Does not need coverage No, but may need to be (Refer to Water Board staff)
- Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	✓				
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				
E. Outdoor Parking Areas and Access Roads	✓				
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Business kept all oil base/paint inside the facility; Disposed properly, the left over paint/oil base are placed in the 55 gallon drum separately.

No Violation observed.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs.		<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None	<input type="checkbox"/> 1. Verbal Warning	<input type="checkbox"/> 2. Warning Notice or Admin. Action
	<input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery	<input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative:

Fernando Franco

Inspector:

Ma Gardner

PR 0054366



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 1/10/2012 Unincorporated Food Haz Mat Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Sunrise Senior Living SITE ADDRESS: 1010 Alameda de las Pulgas CONTACT NAME: Juan Lorett PHONE: 650-582440 BUSINESS TYPE/ACTIVITY: Senior Care Facility SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator Sanitary sewer Above ground storage tanks Retail food facility Other Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, and Other (describe).

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Facility well-maintained cleanliness No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs Low - every 5 yrs Referred to: ENFORCEMENT LEVELS: Verbal Warning Warning Notice or Admin. Action Admin. Action Penalty &/or Cost Recovery Legal Action

Were violations corrected <=10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: [Signature]



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community. *PR0054209*

City: Belmont Unincorporated
 Date: 11/4/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Autobahn Motors SITE ADDRESS: 1315 Elmer St.

CONTACT NAME: Brennert Haun PHONE: _____ BUSINESS TYPE/ACTIVITY: Auto Repair SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

no violation observed

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: Brennert Haun Inspector: Max Anderson



PR 0039193

**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

City: Belmont Unincorporated
Date: 1/4/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
Follow-up / Re-Inspection Due:

NAME OF FACILITY: Carguest Auto Parts SITE ADDRESS: 19 Karen Road

CONTACT NAME: Joe Edwards PHONE: 650 598-3730 BUSINESS TYPE/ACTIVITY: Auto Supplier SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	✓				
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):	✓				Found small drainage inside the facility. That looks well maintained.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

Businesses with a follow-up/re-inspection should be assigned High 2 yrs.
ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Mae Gardner



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 1/24/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due: PR 00 3916 8

NAME OF FACILITY: Pumps and Equipment Repair SITE ADDRESS: 31 Karen Rd

CONTACT NAME: Leroy Rebahn PHONE: 650-593-6924 BUSINESS TYPE/ACTIVITY: Commercial vehicle repair SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):	<input checked="" type="checkbox"/>				

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up inspection Report

Facility Representative: [Signature] Inspector: Mr Gardner



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0055909

City: Belmont Unincorporated
 Date: 2/15/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Belmont-Redwood Shores School District SITE ADDRESS: 801 Granada St.

CONTACT NAME: John Eaves PHONE: 650-222-8770 BUSINESS TYPE/ACTIVITY: School District Maintenance SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas		1	0		wash vehicle outside approximately twice a year
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>				
I. Other (describe):					John mentioned he found 50 gal of abandoned paint/lake and he stored in the maintenance facility.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no.

No Violation observed during my visit
- Provide John HAW brochure to contact our program for schedule appl. "Abandonment" waste.

See attached for more comments.
 PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:
 Businesses with a follow-up/re-inspection should be assigned High 2 yrs.
 ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: John Eaves Inspector: Maie Gardner
 L/Open/Hazmat/Admin/Current/Forms/Stormwater 20101020



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community. *PR 0041558*

City: Belmont Unincorporated
 Date: 1/4/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up **Follow-up / Re-Inspection Due:**

NAME OF FACILITY: Little Belmont Cafe SITE ADDRESS: 232 Harbor Blvd

CONTACT NAME: Modesto Sarabia PHONE: 650-592-6721 BUSINESS TYPE/ACTIVITY: Restaurant/Cafe SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		removed the cardboard by the door access to the road during my visit
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas		1	0		drainage from indoor by the kitchen looks cleaned
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Modesto Sarabia Inspector: Mae Gardner
 L/Open/Hazmat/AdmIn/CurrentForms/Stormwater_20101020



PR0041584
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 1/25/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Shoreway Cafe SITE ADDRESS: 701 Shoreway

CONTACT NAME: Hyun Soak Kim PHONE: 650-592-6007 BUSINESS TYPE/ACTIVITY: Cafe/pan/bakery SIC: _____
 Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____
 Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>				
C. Outdoor Waste Storage/Disposal Areas		1	0		
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>				
E. Outdoor Parking Areas and Access Roads		1	0		
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				
G. Rooftop Equipment	<input checked="" type="checkbox"/>				
H. Outdoor Drainage from Indoor Areas		1	0		Drainage kitchen area looks cleared
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

no violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:	
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning 2. <input type="checkbox"/> Warning Notice or Admin. Action 3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery 4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Mae Gardner
 L/Open/Hazmat/Admin/CurrentForms/Stormwater_20101020



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0041571

City: Petaluma Unincorporated

Date: 2/1/2012 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY: Caprinos Italian Restaurant SITE ADDRESS: 1000 6th

CONTACT NAME: Anthony Awad PHONE: 650-591-4156 BUSINESS TYPE/ACTIVITY: Restaurant & Bar SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	Potential		Effectiveness		Actual Discharge		<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
	N/A	PTNL	BMP	NSW	NSW	NSW	
A. Outdoor Process/Manufacturing Areas	✓						
B. Outdoor Material Storage Areas	✓						
C. Outdoor Waste Storage/Disposal Areas		1	0				
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓						
E. Outdoor Parking Areas and Access Roads		1	0				
F. Outdoor Wash Areas	✓						
G. Rooftop Equipment	✓						
H. Outdoor Drainage from Indoor Areas		1	0				couple of sewer looks great
I. Other (describe):							

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No violation observed during my visit

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:			
ENFORCEMENT LEVELS: <input checked="" type="checkbox"/> None		<input type="checkbox"/> 1. Verbal Warning <input type="checkbox"/> 2. Warning Notice or Admin. Action <input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery <input type="checkbox"/> 4. Legal Action	

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: _____

Inspector: Mae Gardner



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0041547

City: Belmont Unincorporated

Date: 2/1/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY
Lunardis Market

SITE ADDRESS
1085 Alameda De Las Pulgas

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

- Air quality Hazmat business plan None Sanitary sewer
- Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
- Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage / Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual Businesses with a follow-up/re-inspection should be assigned High		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	<input type="checkbox"/> 1. Verbal Warning	<input type="checkbox"/> 2. Warning Notice or Admin. Action	<input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery	<input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: BRENT GUIER



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PROO 41576

City: Belmont Unincorporated

Date: 1/31/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Baskin Robbins SITE ADDRESS: 1023 Alameda De Las Pulgas

CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		0	1		Garbage / Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

* No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: Emmeque Aguiar

Inspector: BRENT GUIER



**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 1/24/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
Follow-up / Re-Inspection Due:

NAME OF FACILITY: Holiday Liquors SITE ADDRESS: 601 Ralston

CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		0	1		Garbage/Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs. <input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None <input type="checkbox"/> 1. Verbal Warning <input type="checkbox"/> 2. Warning Notice or Admin. Action <input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery <input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: BRENT GUEER



PRO047449

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 2/8/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Dollar Tree Store SITE ADDRESS: 516 El Camino Real

CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

<input type="checkbox"/> Air quality	<input type="checkbox"/> Hazmat business plan	<input type="checkbox"/> None	<input type="checkbox"/> Sanitary sewer
<input type="checkbox"/> Fire department (hazmat storage)	<input type="checkbox"/> Hazmat waste generator	<input type="checkbox"/> Underground storage tanks	<input type="checkbox"/> Above ground storage tanks
		<input checked="" type="checkbox"/> Retail food facility	<input type="checkbox"/> Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage / Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Re surfacing area at this time.
No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admn. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Brent Duen

PRODS0653



SAN MATEO COUNTYWIDE Water Pollution Prevention Program

Clean Water, Healthy Community.

City: Belmont Unincorporated

Date: 2/8/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY Edible Arrangements SITE ADDRESS 390 El Camino Real

CONTACT NAME PHONE BUSINESS TYPE/ACTIVITY SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW, and a notes column. Row C contains handwritten '1 0' and 'Garbage/ Dumpster'.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: Verbal Warning Warning Notice or Admin. Action Admin. Action Penalty &/or Cost Recovery Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: BRENT GUIER

PR0041581



SAN MATED COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Unincorporated Date: 2/8/12 Food Haz Mat Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Mountain Mikes Pizza SITE ADDRESS: 390 El Camino Real CONTACT NAME: PHONE: BUSINESS TYPE/ACTIVITY: SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Fire department (hazmat storage) Hazmat business plan Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW, Follow-Up Action Required. Includes rows A through I for various outdoor areas.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs Low - every 5 yrs Referred to:

ENFORCEMENT LEVELS: Verbal Warning Warning Notice or Admin. Action Admin. Action Penalty &/or Cost Recovery Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Brent Guier



SAN MATED COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PK0041614

City: Belmont Unincorporated

Date: 2/14/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up **Follow-up / Re-Inspection Due:**

NAME OF FACILITY Totos Pizzeria SITE ADDRESS 1200 El Camino Real

CONTACT NAME _____ PHONE _____ BUSINESS TYPE/ACTIVITY _____ SIC _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	2		Shared dumpster Area
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Dumpster area has build-up of trash, food, etc. Clean and bag all debris and place in dumpster. Do not spray down with water. Storm drain is close by and should not be polluted.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

Businesses with a follow-up/re-inspection should be assigned High Verbal Warning Warning Notice or Admin. Action Admin. Action Legal Action Admin. Action with Penalty &/or Cost Recovery

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Rogelio Delgado

Inspector: Brent Deir

PR0041552



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Unincorporated Date: 2/14/12 Food Haz Mat Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Mc Donalds SITE ADDRESS: 522 El Camino Real

CONTACT NAME PHONE BUSINESS TYPE/ACTIVITY SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW, and a checkbox for educational outreach material. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, and Other (describe).

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

Table with priority routine inspection options: High - Annual, Medium - every 2 yrs., Low - every 5 yrs., Referred to: Enforcement levels: Verbal Warning, Warning Notice or Admin. Action, Admin. Action with Penalty &/or Cost Recovery, Legal Action.

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Alina Tellez Inspector: Brent Quier



PR0064908

**SAN MATEO COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 2/14/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due:

NAME OF FACILITY: Quinzas Sub SITE ADDRESS: 1480 El Camino Real
 CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

<input type="checkbox"/> Air quality	<input type="checkbox"/> Hazmat business plan	<input type="checkbox"/> None	<input type="checkbox"/> Sanitary sewer
<input type="checkbox"/> Fire department (hazmat storage)	<input type="checkbox"/> Hazmat waste generator	<input type="checkbox"/> Underground storage tanks	<input type="checkbox"/> Above ground storage tanks
		<input checked="" type="checkbox"/> Retail food facility	<input type="checkbox"/> Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage / Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual <input checked="" type="checkbox"/> Medium - every 2 yrs. <input type="checkbox"/> Low - every 5 yrs.		<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action
	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: Kassandra Cis Inspector: Brent Quier



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0041572

City: Belmont Unincorporated

Date: 2/14/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due:

NAME OF FACILITY: Dominos Pizza SITE ADDRESS: 1501 El Camino Real

CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer

Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks

Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas					<u>Garbage / Dumpster</u>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooflop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Kristina

Inspector: Brent Duran



PR0064639

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 2/2/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY Subway

SITE ADDRESS 1602 El Camino Real

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer

Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks

Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)

Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage/ Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual Businesses with a follow-up/re-inspection should be assigned High		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: Brent Quier



PR0041590

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
Clean Water. Healthy Community.

City: Belmont Unincorporated
Date: 2/21/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Papa Morphys SITE ADDRESS: 1602 El Camino Real
CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage/Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

Businesses with a follow-up/re-inspection should be assigned High

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Dyane Moran Inspector: Brent Davis
L:\Open\Hazmat\Admin\CurrentForms\Stormwater_20101020



PRO041614

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 2/21/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY
Totos Pizzeria

SITE ADDRESS
1200 El Camino Real

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality

Hazmat business plan

None

Sanitary sewer

Fire department (hazmat storage)

Hazmat waste generator

Underground storage tanks

Above ground storage tanks

Retail food facility

Other

Is the facility covered under a storm water permit?

Does not need coverage

No, but may need to be (Refer to Water Board staff)

Individual

General:

Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		2	0		Dumpster / Garbage area.
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Area found to be properly cleaned up.

Storm water drain area appears OK.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual Businesses with a follow-up/re-inspection should be assigned High		<input checked="" type="checkbox"/> Medium -- every 2 yrs.	<input type="checkbox"/> Low -- every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	<input type="checkbox"/> 1. Verbal Warning	<input type="checkbox"/> 2. Warning Notice or Admin. Action	<input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery	<input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Rogeli Delgado

Inspector: Brent Duer



PR0041605

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 2/27/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
 Re-Inspection Due:

NAME OF FACILITY
Safeway

SITE ADDRESS
1100 El Camino Real

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

<input type="checkbox"/> Air quality	<input type="checkbox"/> Hazmat business plan	<input type="checkbox"/> None	<input type="checkbox"/> Sanitary sewer
<input type="checkbox"/> Fire department (hazmat storage)	<input type="checkbox"/> Hazmat waste generator	<input type="checkbox"/> Underground storage tanks	<input type="checkbox"/> Above ground storage tanks
		<input checked="" type="checkbox"/> Retail food facility	<input type="checkbox"/> Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage/Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: _____

Inspector: Bret Durr



PR006 9702

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
Clean Water. Healthy Community.

City: Belmont Unincorporated
Date: 2/28/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY
California Jamin

SITE ADDRESS
519 Marine View

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

- Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit?

- Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage/Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

To be assigned to "The Kitchen Company" (main kitchen owner).

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: S. Seward

Inspector: Bret Auer



PR0041623

SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 3/1/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY: Belmont Certified Farmers Mkt SITE ADDRESS: El Camino & O'Neil

CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other CFM

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
<u>C.</u> Outdoor Waste Storage/Disposal Areas		1	0		Garbage Area
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
<u>I.</u> Other (describe):		1	0		Waste Water Disposal

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

- No problems noted -

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Tom Michael Inspector: Brent Drier
 L/Open/Hazmat/Admin/CurrentPoints/Stormwater_20101020



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0039121

City: Belmont Unincorporated

Date: 3/1/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY The New Harbor

SITE ADDRESS 150 Harbor

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.)

- Air quality
- Fire department (hazmat storage)
- Hazmat business plan
- Hazmat waste generator
- None
- Sanitary sewer
- Underground storage tanks
- Above ground storage tanks
- Retail food facility
- Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff) Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas					
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					<u>Garbage / Dumpster</u>
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual Businesses with a follow-up/re-inspection should be assigned High		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	<input type="checkbox"/> 1. Verbal Warning	<input type="checkbox"/> 2. Warning Notice or Admin. Action	<input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery	<input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: [Signature]



PROO 41544
 SAN MATEO COUNTYWIDE
 Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 3/2/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY
Village Host Pizza

SITE ADDRESS
1017 Alameda De Las Pulgas

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

- Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit?

- Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge

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		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas					<u>Garbage/Dumpster</u>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual Businesses with a follow-up/re-inspection should be assigned High		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	<input type="checkbox"/> 1. Verbal Warning	<input type="checkbox"/> 2. Warning Notice or Admin. Action	<input type="checkbox"/> 3. Admin. Action with Penalty &/or Cost Recovery	<input type="checkbox"/> 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Nick Bortner

Inspector: BRENT GUTER



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 2/27/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Starbucks SITE ADDRESS: 1050 El Camino Real

CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s); Follow-Up Action Required: IF NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	1		Garbage/Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Dumpster area has build up of grease, odor. Property Management maintains area & will be contacted. Please contact them also. * Anchor Prop. Mgmt: (415) 621-2700. Area shared by food businesses in complex.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Brent Duvier



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0041603

City: Belmont Unincorporated
 Date: 2/27/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY Hyatt House SITE ADDRESS 400 Concourse

CONTACT NAME _____ PHONE _____ BUSINESS TYPE/ACTIVITY _____ SIC _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage / Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

Note: Name change from "Summerfield Suites Hotel"

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. Referred to:
 Businesses with a follow-up/re-inspection should be assigned High

ENFORCEMENT LEVELS: None 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Brett Davis

STORMWATER INSPECTIONS & VIOLATIONS SUMMARY

Municipality: Belmont
 Period Covered by this Report: April 1 through June 30, 2012
 Period Covered by the Previous Report: Jan 1 through March 31, 2012
 Date: 07/25/12

Total Number of Inspections:	Haz Mat	Food
Total Number of Violations:	1	8
Total Follow-up Actions:	0	0
Total Violations Corrected:	0	0
Total Violations Pending:	na	na
	0	0

NAME ADDRESS TYPE OF BUSINESS	VIOL. DATE	INSP	TYPES OF VIOLATIONS		COMMENTS AND/OR DESCRIPTION OF VIOLATION	ENFORCEMENT ACTIONS					FOLLOW-UP ACTION	VIOLATIONS CORRECTED (YES/NO)	DATE CORRECTED	
			PTNL + BMP ≥ 4	NSW		N O N E	V W	W N	A A \$	L A				
					including whether violating flow reached a creek or other waterbody, (name waterbody)									

Type of Violation:

PTNL + BMP ≥ 4
 NSW Non-Stormwater Discharge

If the combined value of high potential for a Pollutant Discharge plus poor BMPs equals 4, Follow-up Action is required
 Discharge of non-stormwater materials to storm drain system. Non-stormwater discharges are allowed
 by the NPDES permit as conditionally exempted should not be identified as a NSW violation.

Enforcement Actions:

None No Action Taken
 VW Verbal Warning
 WN Warning Notice

AA\$ Admin. Action with Penalty
 LA Legal Notice

PR0042441



SAN MATEO COUNTYWIDE Water Pollution Prevention Program

Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 4/2/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due:

NAME OF FACILITY Coyote Mexican Cafe

SITE ADDRESS 1003 Alameda De Las Pulgas

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW, and a large text box for notes. Row C contains handwritten '1', '0', and 'Garbage / Dumpster'.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs Low - every 5 yrs Referred to: ENFORCEMENT LEVELS: Verbal Warning Warning Notice or Admn. Action Admin. Action with Penalty &/or Cost Recovery Legal Action

Were violations corrected <=10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative:

Inspector: Brent Swin

PRO041570



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 4/2/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due:

NAME OF FACILITY: Deli

SITE ADDRESS: 1301 G St

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW, and a large text area for notes. Row C contains handwritten '1 0' and 'Garbage / Dumpster'.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs Low - every 5 yrs Referred to: ENFORCEMENT LEVELS: Verbal Warning Warning Notice or Admin. Action Admin. Action Penalty &/or Cost Recovery Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative:

Inspector: Brent Amis

PR0067299



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water, Healthy Community.

City: Belmont Unincorporated

Date: 5/8/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up / Re-Inspection Due:

NAME OF FACILITY: Belmont Gyros House SITE ADDRESS: 1397 El Camino Real CONTACT NAME: PHONE: BUSINESS TYPE/ACTIVITY: SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff) Individual General Does the facility have a SWPPP? yes no

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, NSW, Actual Discharge. Rows include Outdoor Process/Manufacturing Areas, Outdoor Material Storage Areas, Outdoor Waste Storage/Disposal Areas, Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas, Outdoor Parking Areas and Access Roads, Outdoor Wash Areas, Rooftop Equipment, Outdoor Drainage from Indoor Areas, Other (describe).

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs Low - every 5 yrs Referred to: ENFORCEMENT LEVELS: 1. Verbal Warning 2. Warning Notice or Admin. Action 3. Admin. Action with Penalty &/or Cost Recovery 4. Legal Action

Were violations corrected <=10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative:

Inspector: Brent Jui

PRO041556



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Date: 6/19/12 Standard Stormwater Facility Inspection Report Form

Reason for Inspection: Routine Inspection Follow-up / Re-Inspection Due:

NAME OF FACILITY: The Lariat SITE ADDRESS: 1428 El Camino Real

CONTACT NAME PHONE BUSINESS TYPE/ACTIVITY SIC

Pollutants of Concern Used at Facility? If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General: Does the facility have a SWPPP?

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effect-iveness, Actual Discharge, NSW. Includes rows A through I for various outdoor areas. Handwritten entry for C: 1 0 Garbage / Dumpster.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system

No problems noted at this time

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs. Low - every 5 yrs. ENFORCEMENT LEVELS: Verbal Warning Warming Notice or Admin. Action Admin. Action with Penalty &/or Cost Recovery Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: TO FILE Inspector: Brent Dan



PR0041567
SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

City: Belmont Unincorporated
 Date: 6/26/12 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up
 Follow-up / Re-Inspection Due:

NAME OF FACILITY: Safeway Store SITE ADDRESS: 2100 Rabston

CONTACT NAME: _____ PHONE: _____ BUSINESS TYPE/ACTIVITY: _____ SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	PTNL	Effect- iveness BMP	Actual Discharge NSW	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		2	0		Garbage/Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Brent Guier
 L/Open/Hazmat/Admin/Current/Forms/Stormwater_20101020

PR0001602 / 41578



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 6/21/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Lorenzos Sandwich Shop SITE ADDRESS: 911 Villa

CONTACT NAME: PHONE: BUSINESS TYPE/ACTIVITY: SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Fire department (hazmat storage) Hazmat business plan Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Effectiveness, Actual Discharge, NSW, and notes. Row C contains handwritten '1', '0', and 'Garbage/Dumpster'.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

Handwritten: No problems noted.

See attached for more comments.

Form with sections: PRIORITY ROUTINE INSPECTION (High, Medium, Low, Referred), ENFORCEMENT LEVELS (Verbal Warning, Admin. Action, Legal Action), and a question about violation correction.

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Brent Quier



PR0041574

**SAN MATED COUNTYWIDE
Water Pollution Prevention Program**
Clean Water. Healthy Community.

City: Belmont Unincorporated

Date: 6/21/12 Food Haz Mat

Standard Stormwater Facility Inspection Report Form

Reason for inspection: First Inspection Routine Inspection Response to Complaint Follow-up

Follow-up /
Re-Inspection Due:

NAME OF FACILITY

Blue Sky Cafe

SITE ADDRESS

1625 El Camino Real

CONTACT NAME

PHONE

BUSINESS TYPE/ACTIVITY

SIC

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)

Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Retail food facility Other _____

Is the facility covered under a storm water permit? Does not need coverage No, but may need to be (Refer to Water Board staff)
 Individual General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					
B. Outdoor Material Storage Areas					
C. Outdoor Waste Storage/Disposal Areas		1	0		Garbage/Dumpster
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					
E. Outdoor Parking Areas and Access Roads					
F. Outdoor Wash Areas					
G. Rooftop Equipment					
H. Outdoor Drainage from Indoor Areas					
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

No problems noted at this time.

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual		<input checked="" type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
Businesses with a follow-up/re-inspection should be assigned High				
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery	4. <input type="checkbox"/> Legal Action

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: [Signature]

Inspector: Bret Jiri

P R 0041543



SAN MATEO COUNTYWIDE Water Pollution Prevention Program Clean Water. Healthy Community.

City: Belmont Unincorporated Date: 4/2/12 Food Haz Mat Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Hala Mexican Restaurant SITE ADDRESS: 1015 Alameda De Las Pulgas CONTACT NAME: PHONE: BUSINESS TYPE/ACTIVITY: SIC:

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other

Is the facility covered under any other programs or permits? (Check all that apply.) Air quality Hazmat business plan Fire department (hazmat storage) Hazmat waste generator None Underground storage tanks Retail food facility Sanitary sewer Above ground storage tanks Other

Is the facility covered under a storm water permit? Does not need coverage Individual No, but may need to be (Refer to Water Board staff) General Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

Table with columns: ACTIVITY AREAS, N/A, PTNL, BMP, Actual Discharge, NSW, and Follow-Up Action Required. Row C: Outdoor Waste Storage/Disposal Areas has PTNL 1, BMP 0, and NSW Garbage/Dumpster.

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

no problems noted at this time

See attached for more comments.

PRIORITY ROUTINE INSPECTION: High - Annual Medium - every 2 yrs Low - every 5 yrs Referred to: ENFORCEMENT LEVELS: None Verbal Warning Warning Notice or Admin. Action Admin. Action with Penalty &/or Cost Recovery Legal Action

Were violations corrected <= 10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no or see Follow-Up Inspection Report

Facility Representative: Lou DeMars Inspector: Brent Davis



SAN MATEO COUNTYWIDE
Water Pollution Prevention Program
 Clean Water. Healthy Community.

PR0040288

City: Belmont Unincorporated
 Date: 4/25/2012 Food Haz Mat
Standard Stormwater Facility Inspection Report Form

Reason for Inspection: First Inspection Routine Inspection Response to Complaint Follow-up Follow-up / Re-Inspection Due:

NAME OF FACILITY: Wheel Work Belmont SITE ADDRESS: 120 El Camino Real

CONTACT NAME: John Davro PHONE: 650 5923200 BUSINESS TYPE/ACTIVITY: New tires/ auto repair SIC: _____

Pollutants of Concern Used at Facility? yes no If yes, indicate which ones: PCBs Mercury Copper Other _____

Is the facility covered under any other programs or permits? (Check all that apply.)
 Air quality Hazmat business plan None Sanitary sewer
 Fire department (hazmat storage) Hazmat waste generator Underground storage tanks Above ground storage tanks
 Individual Does not need coverage Retail food facility Other _____
 No, but may need to be (Refer to Water Board staff) General: Does the facility have a SWPPP? yes no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential NSW = Non-Stormwater Discharge
 BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

ACTIVITY AREAS	N/A	Poten- tial	Effect- iveness	Actual Discharge	<input type="checkbox"/> Check box if educational outreach material is distributed and provide title(s) of outreach material(s): Follow-Up Action Required: If NSW is found, or total score for PTNL plus BMP is 4 or more, note Enforcement Level below and assign date for Follow-up / Re-Inspection Due above.
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	✓				
B. Outdoor Material Storage Areas	✓				
C. Outdoor Waste Storage/Disposal Areas	✓				
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	✓				
E. Outdoor Parking Areas and Access Roads		1	1		
F. Outdoor Wash Areas	✓				
G. Rooftop Equipment	✓				
H. Outdoor Drainage from Indoor Areas	✓				
I. Other (describe):					

COMMENTS/REMARKS/REQUIREMENTS Structural control present Maintenance required in storm drain system yes no

The business does not discharge any material to the surrounding area or storm drain system

See attached for more comments.

PRIORITY ROUTINE INSPECTION: <input type="checkbox"/> High - Annual	<input type="checkbox"/> Medium - every 2 yrs.	<input type="checkbox"/> Low - every 5 yrs.	<input type="checkbox"/> Referred to:
ENFORCEMENT LEVELS: <input type="checkbox"/> None	1. <input type="checkbox"/> Verbal Warning	2. <input type="checkbox"/> Warning Notice or Admin. Action	3. <input type="checkbox"/> Admin. Action with Penalty &/or Cost Recovery
		4. <input type="checkbox"/> Legal Action	

Were violations corrected ≤10 days or otherwise deemed resolved in a longer, but still timely manner? N/A yes no see Follow-Up Inspection Report

Facility Representative: [Signature] Inspector: Robert Keliang



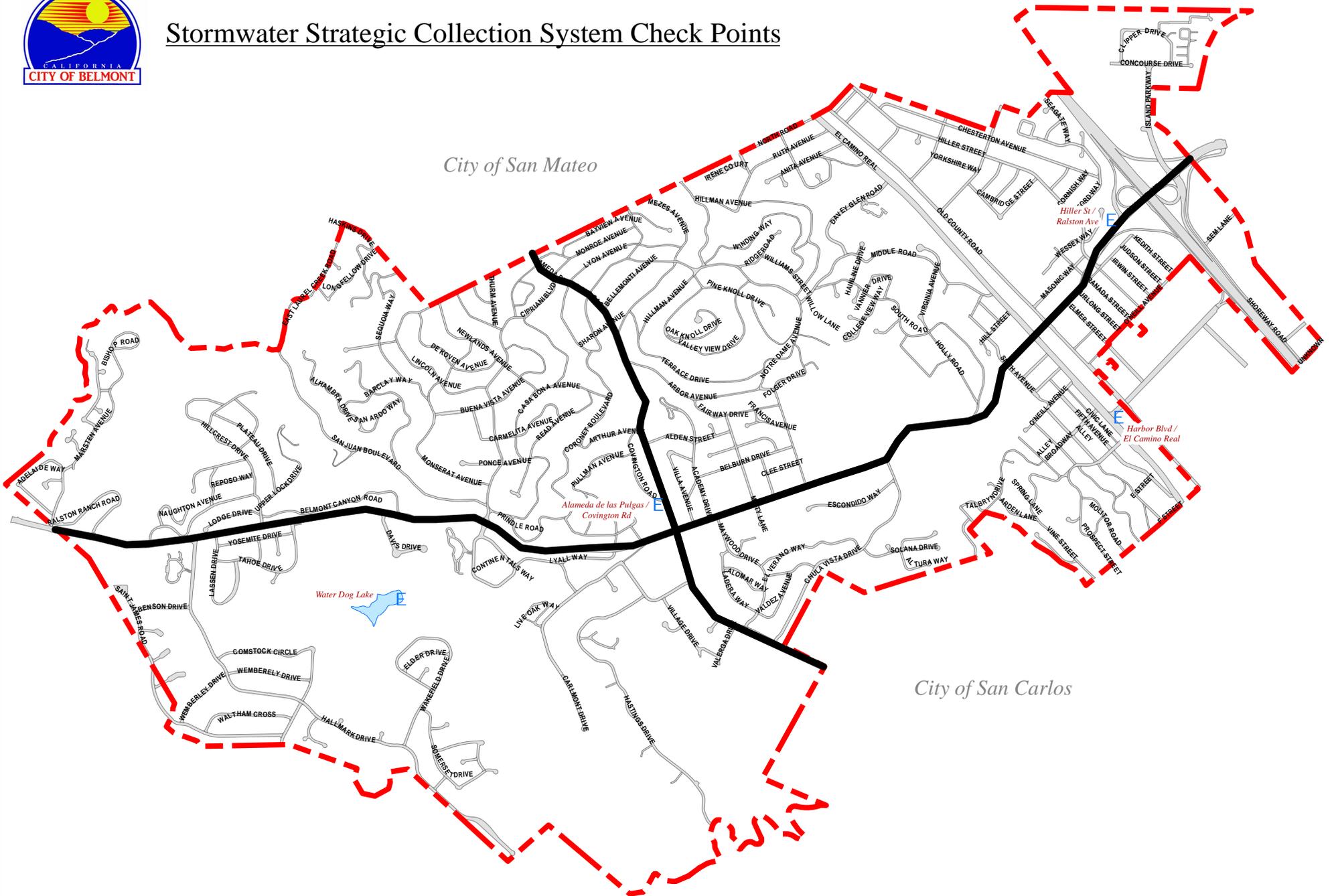
Illicit Discharge Complaint and Response Program

1. DPW dispatch receives a call about a spill or illicit discharge
2. DPW dispatch will make a determination from the caller if S-5 is required or if the PW construction inspector should be dispatched.
3. If DPW Dispatch determines that the spill or discharge is questionable or minor with no immediate threat to waterways. Then the DPW construction inspector will be dispatched.
3. If DPW Dispatch determines that the spill or discharge is a medium to high threat to waterways, dispatch contacts DPW construction inspector and S-5 truck or if S-5 is unavailable the Sewer/Storm Field Supervisor directly. The supervisor will then request an alternate crew to come on site to ensure that storm drain catch basins are protected. At the same time DPW Dispatch notifies CII Coordinator about the spill.
4. If the spill is hazardous (i.e. gasoline truck overturns), CII Coordinator contacts Belmont Fire Department HazMat Team.
5. If it is not clear, whether the spill is hazardous or not, S-5 notifies CII Coordinator upon arriving on site. Then CII Coordinator contacts Belmont Fire Department HazMat Team.
6. If a violator is present, the DPW construction inspector or S-5 will obtain all information from him/her including the person's name, company name, phone number and manager's name and request an immediate clean-up (applicable BMPs shall be given the violator along with the verbal explanation of what they are and how they should be used). Photos shall be taken.
7. If an illicit discharge is caused by a contractor working on a project, S-5 or inspector shall contact DPW Dispatch to investigate if any permits were issued for the work taking place. If no permits were issued, DPW Dispatch shall contact Belmont Code Enforcement Officer and the Permit Center Manager.
8. If a violator is not compliant or traffic needs to be re-routed or require a lane closure, S-5 contacts Belmont PD Dispatch or requests CII Coordinator to notify Belmont PD Dispatch.
9. S-5 should ensure that the storm drain inlets are protected until the illicit discharge is stopped and abated by the violator.
10. If a violator is not identified, S-5 shall do a clean-up of the area and then DPW in conjunction with CII Coordinator and PD Dispatch perform an investigation to locate the violating party.
11. If the discharge is extensive or possesses a threat to public health and safety, CII Coordinator shall notify San Mateo County Environmental Health.



Stormwater Strategic Collection System Check Points

Attachment C.5.e.iii



City of San Mateo

City of San Carlos



NOT TO ANY SCALE
SEPTEMBER 2011



C.5.e - Storm System Screening Form

Stormwater Program or City Name

Inspection Date: 9/15/2011 Inspection Time: 9:15 AM

Inspector Name: Ryan Moran

Inspecting Agency: City of Belmont

Time Since Last Rain: Less than 3 weeks Longer than 3 Weeks

Storm Facility Location(ID): Alameda De Las Pulgas cross of Covington Road

Receiving Water: _____

Storm Facility Type: End of Pipe Creek Channel Ditch Pump Station

Drop Inlet/Catch Basin Other, Describe: _____

Illicit Discharge or Illegal Dumping Found During Screening? Yes No

Describe: _____

Observations:

Standing/Stagnant Water: Yes No

Flow: None Trickle Steady High

Aprox. Depth of Flow: _____ inches

Estimated Trash Volume: High Medium Low ND

Comment: _____

Odor: Present Absent

Comment: _____

Color: Present Absent

Comment: _____

Turbidity: High Medium Low ND

Comment: _____

Hydrocarbon sheen: High Medium Low ND

Comment: _____

If an Illicit Discharge or Illegal Dumping Was Found, Describe Potential Source(s):

Actions Taken:

Was Illicit Discharge or Illegal Dumping Follow Up Needed? Yes No NA

Comment: _____

If Yes, Describe Corrective/Follow-up Actions Taken: _____

Date Completed: 9/15/2011







C.5.e - Storm System Screening Form

Stormwater Program or City Name

Inspection Date: 9/15/2011 Inspection Time: 9:15 AM

Inspector Name: Ryan Moran

Inspecting Agency: City of Belmont

Time Since Last Rain: Less than 3 weeks Longer than 3 Weeks

Storm Facility Location(ID): Harbor Boulevard cross of El Camino Real

Receiving Water: _____

Storm Facility Type: End of Pipe Creek Channel Ditch Pump Station

Drop Inlet/Catch Basin Other, Describe: _____

Illicit Discharge or Illegal Dumping Found During Screening? Yes No

Describe: _____

Observations:

Standing/Stagnant Water: Yes No

Flow: None Trickle Steady High

Aprox. Depth of Flow: 2 inches

Estimated Trash Volume: High Medium Low ND

Comment: _____

Odor: Present Absent

Comment: _____

Color: Present Absent

Comment: _____

Turbidity: High Medium Low ND

Comment: _____

Hydrocarbon sheen: High Medium Low ND

Comment: _____

If an Illicit Discharge or Illegal Dumping Was Found, Describe Potential Source(s):

Actions Taken:

Was Illicit Discharge or Illegal Dumping Follow Up Needed? Yes No NA

Comment: _____

If Yes, Describe Corrective/Follow-up Actions Taken: _____

Date Completed: 9/15/2011







C.5.e - Storm System Screening Form

Stormwater Program or City Name

Inspection Date: 9/15/2011 Inspection Time: 9:30 AM

Inspector Name: Ryan Moran

Inspecting Agency: City of Belmont

Time Since Last Rain: Less than 3 weeks Longer than 3 Weeks

Storm Facility Location(ID): Hiller Street cross of Ralston Avenue

Receiving Water: _____

Storm Facility Type: End of Pipe Creek Channel Ditch Pump Station

Drop Inlet/Catch Basin Other, Describe: _____

Illicit Discharge or Illegal Dumping Found During Screening? Yes No

Describe: _____

Observations:

Standing/Stagnant Water: Yes No

Flow: None Trickle Steady High

Aprox. Depth of Flow: _____ inches

Estimated Trash Volume: High Medium Low ND

Comment: _____

Odor: Present Absent

Comment: _____

Color: Present Absent

Comment: _____

Turbidity: High Medium Low ND

Comment: _____

Hydrocarbon sheen: High Medium Low ND

Comment: _____

If an Illicit Discharge or Illegal Dumping Was Found, Describe Potential Source(s):

Actions Taken:

Was Illicit Discharge or Illegal Dumping Follow Up Needed? Yes No NA

Comment: _____

If Yes, Describe Corrective/Follow-up Actions Taken: _____

Date Completed: 9/15/2011











C.5.e - Storm System Screening Form

Stormwater Program or City Name

Inspection Date: 9/16/2011 Inspection Time: 2:00 PM

Inspector Name: Ryan Moran

Inspecting Agency: City of Belmont

Time Since Last Rain: Less than 3 weeks Longer than 3 Weeks

Storm Facility Location(ID): Water Dog Lake

Receiving Water: _____

Storm Facility Type: End of Pipe Creek Channel Ditch Pump Station

Drop Inlet/Catch Basin Other, Describe: _____

Illicit Discharge or Illegal Dumping Found During Screening? Yes No

Describe: _____

Observations:

Standing/Stagnant Water: Yes No

Flow: None Trickle Steady High

Aprox. Depth of Flow: _____ inches

Estimated Trash Volume: High Medium Low ND

Comment: _____

Odor: Present Absent

Comment: _____

Color: Present Absent

Comment: _____

Turbidity: High Medium Low ND

Comment: _____

Hydrocarbon sheen: High Medium Low ND

Comment: _____

If an Illicit Discharge or Illegal Dumping Was Found, Describe Potential Source(s):

Actions Taken:

Was Illicit Discharge or Illegal Dumping Follow Up Needed? Yes No NA

Comment: _____

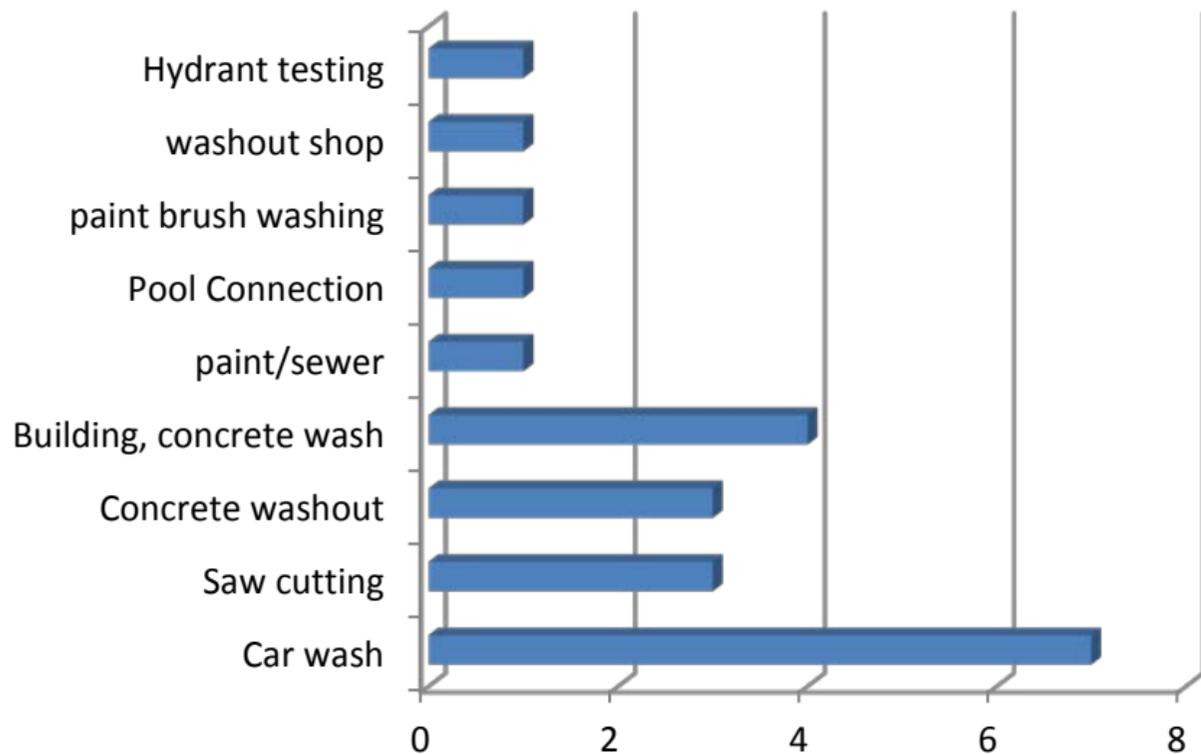
If Yes, Describe Corrective/Follow-up Actions Taken: _____

Date Completed: 9/15/2011







C.5.f.iii. (4) Summary of major types of discharges and complaints

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 6/1/2012

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

901-907 Hiller (Commercial complex at Hiller & Masonic
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Fire service test

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

25-50 gallons

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input checked="" type="checkbox"/> Other (describe) fire service test

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed. Educational

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Yes

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 5/29/2012

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2156 Carlmont Drive
 Business Resident Other

3. Name of Contact: Bonetti Construction
4. Phone: 408-736-6300

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Concrete slurry wash in gutter

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
N/A

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed. Education

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Yes

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 4/27/2012

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2705 Coronet
 Business Resident Other

3. Name of Contact: Owner

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

Washing car and cleaning out trash, recycle and green bin into street

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

10 +/- gallons

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input checked="" type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input checked="" type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Educated him about MRP & Carwashing

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Into catch basin

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 4/27/2012

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation
 Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)
1028 Lassen Drive
 Business Resident Other

3. Name of Contact: Owner

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping
 Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Washing Car

2. Describe frequency of discharge
 Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
5 gallons +/-

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input checked="" type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger
 Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger
Car was all soaped up upon my arrival. Had him finish the wash

2. Describe informational, educational, or BMP information distributed.
Explained that washing is no longer allowed and gave him handout.

3. Describe enforcement action
 None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Into catch basin

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 4/2/2012

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2701 Hallmark Drive
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Washing car, rinse water into gutter

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input checked="" type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Education- verbal, material

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Into catch basin

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 2/10/2012

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

1514 Folger- Police Report CAD 12027056
 Business Resident Other

3. Name of Contact: Elito

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Cutting of quartz countertop

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input checked="" type="checkbox"/> Other (describe) <u>Quartz slurry</u>

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Gave "only rain in the storm drain" Speil

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): No

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 2/10/2012

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

1015 Maywood
 Business Resident Other

3. Name of Contact: Owner

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

Saw cutting sidewalk, concrete slurry washed down gutter

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

5 gallons +/-

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Explained that it is not allowed and gave handouts

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Yes, creek

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 12/20/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2681 Comstock
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Sewer backup

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
less than 5 gallons

4. Describe material discharged

<input checked="" type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input checked="" type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

Called for sewer crew to investigate and possibly rod lateral clearing blockage

2. Describe informational, educational, or BMP information distributed.

Gave plumbers BMP handouts

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): None as of this report

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 12/16/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2715 Monserat
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Car wash

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input checked="" type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Met with person who washed their car, gave handout and explained why you can't wash car where it can drain into street

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Into catchbasin

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 12/14/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2427 Lincoln
 Business Resident Other

3. Name of Contact: Janet Davidow

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

Overflow/backwash from pool piped to gutter

2. Describe frequency of discharge

Continuous Discharge **3. Volume, if quantifiable:**
 Intermittent Discharge
 One time incident

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input checked="" type="checkbox"/> Other (describe) <u>Pool</u>

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Discussed City codes Section 21 and Building codes as to pool connection

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Entered stormdrain

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 12/13/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2707 Newlands
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

Water blasting/cleaning of pavement, driveway and walkway

2. Describe frequency of discharge

Continuous Discharge **3. Volume, if quantifiable:**
 Intermittent Discharge
 One time incident

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input checked="" type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

Sweep and clean gutters and street

2. Describe informational, educational, or BMP information distributed.

Spoke with crew and explained BMP's required for this work

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): entered catch basin

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** Dec. 05-11

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2605 Cipriani
 Business Resident Other

3. Name of Contact: Home owner

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

Car wash water entered street

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input checked="" type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Car wash handouts

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): No

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** Dec. 02-11

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

539 Vannier
 Business Resident Other

3. Name of Contact: N/A

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

Car wash water entered street

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

N/A

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input checked="" type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

did not talk with resident. Left handout and card on car

2. Describe informational, educational, or BMP information distributed.

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Entered storm drain

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** Nov. 30-11

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

252 Old County Rd- Silver Star Auto Body
 Business Resident Other

3. Name of Contact: Camilo Barberena
4. Phone: 650-508-1192

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

Washing outside of building and washing shop bay out into street

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
N/A

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input checked="" type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Met with Mr. Barberena and educated him and performed a commercial site inspection. Sent Silver Star(Mr. Barberena) follow-up latter.

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Did enter storm drain system

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 11/4/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2755 Wemberly
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Saw cut slurry into storm drain

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

Educated him on what not to do

2. Describe informational, educational, or BMP information distributed.

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Unknown

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 10/24/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation
 Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)
1250 Avon
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping
 Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Washing car

2. Describe frequency of discharge
 Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
5 gallons +/-

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input checked="" type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger
 Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger
Stopped during soaping of vehicle. Owner to wash soap residue into landscaping.

2. Describe informational, educational, or BMP information distributed.
Gave car wabs handout and discount coupon

3. Describe enforcement action
 None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Chance is that it will not

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 10/17/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2758 Belmont Canyon Rd
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Washing paint brush in gutter

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input checked="" type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

informed that washing paint in the gutter is not allowed

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): No

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 10/17/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

2810 Belmont Canyon Rd
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Concrete washed down street

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input checked="" type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Home owner not in. Asked them to call me for further instructions.

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Unknown

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 10/14/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation
 Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)
794 Old County Rd - M & G Automotive
 Business Resident Other

3. Name of Contact: Marcus

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping
 Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

2. Describe frequency of discharge
 Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
5 gallons

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input checked="" type="checkbox"/> Other (describe) <u>wash out shop</u>

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger
 Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.
Informed him about not allowing any water into street

3. Describe enforcement action
 None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?):

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 9/7/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation
 Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)
Hillman
 Business Resident Other

3. Name of Contact:
4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping
 Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Water blasting driveway

2. Describe frequency of discharge
 Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
10 gallons +/-

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input checked="" type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger
 Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.
Install sandbags to catch silt/dirt. Explained that this is not allowed.

3. Describe enforcement action
 None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): No

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 8/16/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation
 Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)
1015 Continentals
 Business Resident Other Apartment building

3. Name of Contact: Central Realty Inc. 1700 S. ECR San Mateo, CA 94402

4. Phone: 579-0915

II. DISCHARGE SUMMARY

1. Illegal Dumping
 Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate Rinsed concrete wash down drain in parking lot
which drained to gutter ending up in catch basin down the street

2. Describe frequency of discharge
 Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
unknown

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input checked="" type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger
 Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.
Met with apartment rep. He cleaned it up and I educated him.

3. Describe enforcement action
 None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Yes

Municipality: City of Belmont
Inspector: John Tallitsch **Date:** 8/15/2011

I. SOURCE OF DISCHARGE

1. Describe reason for conducting the investigation

Conducting regularly scheduled field screening Drive By
 Responding to report from the public, staff, another agency, etc.

2. Describe location of source of discharge (address, cross streets, physical features, etc.)

Hotel Belmont
 Business Resident Other

3. Name of Contact: Contractor

4. Phone:

II. DISCHARGE SUMMARY

1. Illegal Dumping

Illicit Connection
 Poor Management Practices
 Describe cause of discharge further, if appropriate

2. Describe frequency of discharge

Continuous Discharge
 Intermittent Discharge
 One time incident

3. Volume, if quantifiable:
5-10 gallons

4. Describe material discharged

<input type="checkbox"/> Sewage	<input type="checkbox"/> Construction Debris	<input type="checkbox"/> Vehicle Cleaning Washwaters
<input type="checkbox"/> Used Motor Oil	<input type="checkbox"/> Wall Compound	<input checked="" type="checkbox"/> Building/Sidewalk Washwaters
<input type="checkbox"/> Antifreeze	<input type="checkbox"/> Food Wastes	<input type="checkbox"/> Other Washwaters
<input type="checkbox"/> Fuels	<input type="checkbox"/> Yard Wastes	<input type="checkbox"/> Industrial Wastes (solvents, metals
<input type="checkbox"/> Paint	<input type="checkbox"/> Sediment and/or silt	<input type="checkbox"/> corrosive, cooling tower, blowdown, etc)
<input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Concrete Cutting Slurry/Washwaters	<input type="checkbox"/> Other (describe)

III. FOLLOW-UP ACTIVITIES

1. Describe action to be taken by discharger

Discharge has been stopped
 Discharge cannot be stopped immediately. Describe corrective actions that will be taken by the discharger

2. Describe informational, educational, or BMP information distributed.

Explained in detail that what he was doing is not allowed and gave him ideas of what he could have done.

3. Describe enforcement action

None Formal Violation
 Warning Notice Legal Action
 Informal Violation (including verbal notice)

4. Comments (did discharge reach water of state, e.g. a creek or bay?): Bay



Outreach Summary and/or Evaluation

Name of Event Regional Anti-Littering Campaign

Date May 2012-ongoing **Hours** various/ongoing

Location City Hall-Public Works Department

Program Advertising Campaigns

Description of Event Be the Street you Want to See "Be The Street"

Booth Location Public Works Front Counter

Total Event Attendance Ongoing-

Public Reaction/Questions/Comments: Those who signed up for the newsletter thought it was a great opportunity to learn more about pollution prevention and how they could take part.

Checklist:

- **Survey** No survey was conducted
- **Number of outreach materials given out** 50 Eco-tote reusable bags to the first 50 people to sign up for the "Be The Street" newsletter
- **Posters** City Hall
- **Newspaper ads** _____
- **Social Media** Facebook, Twitter, Nextdoor.com, Patch.com, Website
- **Other advertising** _____

Result Summary

This outreach started May 2012 and only 11 residents signed up. This outreach is ongoing and will be a part of all upcoming FY12/13 outreach events. This outreach is anticipated to reach many Belmont residents over the next fiscal year.



Outreach Summary and/or Evaluation

Outreach Creek Awareness

Date September 12, 2011 **Hours** N/A-mailing

Location Snail mail notices

Program Public Outreach

Description of Outreach Creek Awareness mailing

Booth Location No booth

Total outreach 121 residents

Public Reaction/Questions/Comments: None

Checklist:

- **Number of Participants** N/A
- **Reach a broad spectrum of the community**
- **Survey** No survey was conducted
- **Number of outreach materials given out** 121 Notices, 121 stormwater pollution prevention brochures
- **Free Media**
- **TV announcement** N/A
- **Press Release** N/A
- **Posters** N/A
- **Newspaper ads** N/A
- **Social Media** N/A
- **Other advertising** US Postal Service

Result Summary

The outreach message was geared to "maintaining a healthy creek" and included proper disposal of yard clippings, keeping creek bank along property free of debris, obtaining proper permits before performing construction along creek, and using non-toxic pest control methods. A stormwater pollution prevention brochure also was included with the mailing. No survey was conducted, as this was an outreach mailing. It is unknown if the residents used the information proactively.



Event Summary and Evaluation

Name of Event	National Public Works Week	
Date	May 21-May 25	Hours 8am - noon & 1pm-5pm
Location	Belmont City Hall-Public Works Department & Corporation Yard	
Program	Public Outreach Events	
Description of Event	Public Works Open-House	
Booth Location	City Hall	
Total Event Attendance	117	

Public Reaction/Questions/Comments:

73 stopped by the stormwater pollution prevention station. Most commented that they thought the open house was a great way to get information and participate.

Checklist:

- **Number of Participants** 117
- **Reach a broad spectrum of the community**
1st year of event, hard to tell turnout without a comparison to previous
- **Survey** No survey was conducted
- **Outreach materials given out**

Childrens pollution prevention activity booklets, fish sponges, car wash tip cards, stormwater pollution prevention, car care, household hazardous waste, OWOW materials, recipe sheets for non-toxic household cleaners and additional brochures.
- **Free Media** Local Channel 27
- **Press Release** None
- **Posters** Library, various city businesses, city buildings
- **Newspaper ads** None
- **Social Media** Facebook/Twitter, Nextdoor.com, Patch.com, website
- **Other advertising** APWA- American Public Works Association website

Result Summary

Two 4th grade classrooms (Immaculate Heart of Mary, Belmont and their sister school St. Pius of Redwood City) attended the stormwater pollution prevention diorama presentation. Children participated by answering questions regarding what is a watershed, where does water go, what types of things cause water pollution, sources of drainage and what can they do to help prevent stormwater pollution. All children were given pollution prevention activity books, bookmarks, sponges and crayons made of soy. There were a total of 117 people visiting various public works displays. 73 stopped by the stormwater pollution prevention and 6 for the battery recycling.



Outreach Summary and/or Evaluation

Outreach _____

Date _____ Hours _____

Location _____

Program _____

Description of Outreach _____

Booth Location _____

Total outreach _____

Public Reaction/Questions/Comments:

Checklist:

- Number of Participants _____
- Reach a broad spectrum of the community _____
- Survey _____
- Number of outreach materials given out _____

- Free Media _____
- TV announcement _____
- Press Release _____
- Posters _____
- Newspaper ads _____
- Social Media _____
- Other advertising _____

Result Summary

Environmental Health Pollution Prevention Outreach Tabling Event Debrief
SMCWPPP stormwater requirement section: C.7.e Public Outreach Events

Event information

Name of Event	San Mateo County Fair
Date	June 9 through June 17
Hours (i.e. 8 - 4pm)	11 a.m. to 10 p.m.
Location	San Mateo
Program (oil, stm, hhw, etc.)	Storm, Oil, Lead

Event Contact Name	Joe Lees
Organization	Sustainable Living Coordinator for SM County Fair
Phone	(650) 576-3646
Website or Email	jflees@comcast.net

Setup & Parking

Vehicle Parking comments	Free Parking passes provided for each day volunteers were present
Load-in/Set-up time	2 hours

Public Turnout & Feedback

Total Event Attendance	Unknown
# People Through Booth	Approximately 2,000 minimum

Public Reaction/Questions/Comments:	<p>People were very interested in the all the programs that were presented. The were 81 people who signed up for the Be The Street E-newsletter. People appreciated getting car wash discount cards, and information on oil recycling, toxics disposal, less toxic gardening information, and children's activity booklets. A comment box was set up to solicit questions from people when the booth was unstaffed. Some of the questions gathered included requesting information on how to control gophers, trash problems near train stations, over watering a multi-family complexes, how to clean painting tools and dispose of washwater properly, how to dispose of refridgerator water filters, and disposal of waste lubricants.</p>
-------------------------------------	---

Event Summary and Evaluation

	<p>The County Fair is an ongoing tradition with a variety of activities for a variety of people, drawing from all over San Mateo County and beyond. From themed exhibit halls, juried shows, animal presentations, carnival rides, and concerts, the fair is a county-</p>
--	--

Description of Event and Vibe:

focused event that is affordable for families. The Sustainable Living exhibit shared the hall with the garden exhibits, so people who were interested in environmental and outdoor activities were drawn to the hall where our booth was located. The exhibit is dedicated to projects related to pollution prevention, recycling, energy savings, etc. There were some static displays of juried entries, and other informative displays, and then booths like ours that were staffed at different times. The booth was located inside the exhibit hall which all for an elaborate display which could be secured overnight and away from the elements. The hall was also separated from the noise of the activity of the other parts of the fair.

Booth Location Summary: The booth was located in the exact middle of the hall with great exposure to people passing through by means of any door in the hall.

Rate the following using a 1-5 scale (1 is bad, 5 is excellent)

Ease of Set up/Pre-event Organization	5
Booth Placement	5
Traffic Flow	5
Public Interest	5
Weather (if event is outdoors)	NA: event was indoors
Overall Event	5

Assessment of the Effectiveness of Efforts

Check Rating Method

Ways to Track Effectiveness

Averaged by Count

Number of participants

Number of participants compared to previous years

Reach a broad spectrum of the community

Survey

Number of outreach materials given out

Other:

Other:

Other:

Result Summary of Effectiveness

The hall was open for a total of 95 hours. 16 volunteers from 9 jurisdictions, combined with additional EH staff, worked at the booth at select times each day for a total of 57 hours of staffed time for the week. The booth was unstaffed for the remaining 38 hours, including night time when most people are at concerts. Representative sampling of the number of people spoken to was taken at different times throughout the week. Based on the sampling, EH calculated an average of 34 people per hour were spoken to during the hours that volunteers were present. Using this averaging, it is estimated roughly 1938 people were contacted during the 57 staffed hours. Countless others had access to the booth during unstaffed times, and were guided by signs and

posters to help themselves to outreach materials.

Marketing Opportunities Checklist

Free Media	√
Pen TV event announcement	
Media Center	
Press Release (date, who)	
Stage Announcement	
Media Attention	
Promo posters posted	√
Logo in Event Materials	√
Newspaper Ads	√
Other Website	
Other Twitter, Facebook	



Event Summary and Evaluation

Name of Event Earthweek On-Land Trash Cleanup

Date April 21, 2012 **Hours** 9-noon

Location Water Dog Lake, Carlmont Shopping Center (perimeter by creek), O'Neill Slough

Program MRP Trash Load Reduction

Description of Event Cleanup of trash onland at various city locations

Booth Location Front of City Hall- signup booth

Total Event Attendance 30

Public Reaction/Questions/Comments: N/A

Checklist:

- **Number of Participants** 28
- **Reach a broad spectrum of the community** Unknown
- **Survey** _____
- **Number of outreach materials given out** 5 water pollution prevention brochures

- **Free Media** Patch.com, Flowstobay.org, CA Coastal Commision website
- **TV announcement** _____
- **Press Release** _____
- **Posters** Library, various city businesses, city buildings
- **Newspaper ads** _____
- **Social Media** Facebook, Twitter, Nextdoor.com
- **Other advertising** Parks sign board on Ralston Ave, PD electronic sign board

Result Summary

This past Saturday marked the first Earth Day “On-land Trash Cleanup” hosted by the City. There were 28 volunteers that came out in the hot weather to make a difference in the community, collecting 375 pounds of garbage and recyclables. A couple unusual items found were an album, workout bench, pot and fork.

Of all the trash picked up, the most collected item was the plastic bag, totaling an overwhelming 100 bags. This number will be a great starting point for outreach with the upcoming plastic bag ban.



Event Summary and Evaluation

Name of Event California Coastal Cleanup Day 2011
Date September 17, 2011 **Hours** 9am - noon
Location Water dog lake, Belmont Creek, O'Neill Slough (north and south)
Program Citizen Involvement Event

Description of Event Coastal Cleanup

Booth Location City Hall

Total Event Attendance 78

Public Reaction/Questions/Comments: Most volunteers commented that they like participating in these type of cleanup events. All comments were positive

Checklist:

- **Number of Participants** same as above
- **Reach a broad spectrum of the community** This is an average turnout based on previous years.
- **Survey** Data cards were distributed but no survey attached.
- **Number of outreach materials given out** aprox. 25. Various brochures such as car wash tip cards, you are the solution to water pollution and childrens activity booklets
- **Free Media** Local Channel 27
- **TV announcement** _____
- **Press Release** Local Press release
- **Posters** Library, various city businesses, city buildings
- **Newspaper ads** Parks and Recreation Activity Guide
- **Social Media** Facebook, Twitter, Nextdoor.com, Patch.com, Website
- **Other advertising** "Flowstobay", Banner over Ralston Ave, electronic signage on Ralston Avenue, Parks and Recreation noticing board on Ralston Avenue.

Result Summary

There were 4 miles total cleaned, 587 pds. of garbage and 213 pds. of recyclables collected. Approximately 25 people brought their own bucket and gloves. There was a raffle for a Soilsaver Compost Bin at the end of the cleanup, along with reusable totes as additional giveaways.



Outreach Summary and/or Evaluation

Outreach "Where Does the Water Flow?"-Diorama Presentation

Date May 25th **Hours** 1:30pm

Location Belmont City Hall- One Twin Pines Lane

Program 4th Grade Elementary School Outreach (-Immaculate Heart of Mary School and sister school from Redwood City-St. Pius School)

Description of Outreach Watershed Diorama Presentation, water pollution prevention awareness

Booth Location City Hall Lobby

Total outreach 63 children

Public Reaction/Questions/Comments: most children understood the concept and thought the diorama was cool

Checklist:

- **Number of Participants** 63 children
- **Reach a broad spectrum of the community** Two 4th grade classrooms
- **Survey** No survey was conducted
- **Number of outreach materials given out** 63 water pollution prevention activity booklets, bookmarks, fish sponges and soy crayons.
- **Free Media** _____
- **TV announcement** _____
- **Press Release** _____
- **Posters** _____
- **Newspaper ads** _____
- **Social Media** _____
- **Other advertising** Emailed schools flyer of event

Result Summary

Some of the questions we asked were: "Where does the rain go?", "What types of things can be carried downstream from water runoff?" "How many of the kids walked along the bay and saw trash floating?", "How can you help from things going into the bay/ocean?". Students were very interactive and really enjoyed the presentation.



Home Product Lookup PUR/NOI Query RMP - Op-ID Pesticide Use Report Help

Active Permit: 4100017

You are logged in as: city of belmont

Active Site:

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- General Info
- Contacts
- Pesticides
- Commodities
- Sites
- Conditions
- Print Permit
- PURs by Permit

Quick Find: Permit

Enter Number or Permittee: 4100017: CITY OF BELMONT

Permit Status: Issued [[View Permit History](#)]

[[View Notes](#)] Save [] Cancel []

About This Permit

Type:	Restricted Materials	Permit Year:	2009	Effective Date:	2/19/2009
Number:	4100017	Issue Date:	2/19/2009	Expiration Date:	12/31/2009
District:	RC	Version #:	1	Issuing Officer:	
		Ag/Non-Ag	Agricultural Use		
Seasonal		Possession & Use			
NOI must be submitted at least 24 hours prior to a planned application of a Restricted Material					
Employee Handles Pesticides			Field Worker Codes:		

Permittee: Operator Contact Information

Operator: G: 4100017 CITY OF BELMONT	
Name: CITY OF BELMONT	Agent Name: OURTIAGUE,DANIEL
Mailing Address 1: 30 TWIN PINES LANE	Physical Address 1: 30 TWIN PINES LANE
Mailing Address 2:	Physical Address 2:
City: BELMONT	City: BELMONT
State - Zip: CA 94002-	State - Zip: 94002
Primary Phone: (650)595-7441	Email: dourtague@belmont.gov
Alternate Phone: (650)595-7442	
Cell Phone: () -	
Fax Number: (650)595-7419	

[[View Notes](#)] Save [] Cancel []

Note: This is a confidential web portal, unauthorized access is strictly prohibited. Connections are logged.
Suggestions?





Home Product Lookup PUR/NOI Query RMP - Op-ID Pesticide Use Report Help

Active Permit: 4100017

You are logged in as: city of belmont

Active Site:

Change Password Change Q and A Logout

- General Info
- Contacts
- Pesticides
- Commodities
- Sites
- Conditions
- Print Permit
- PURs by Permit

Quick Find: Permit

Enter Number or Permittee: 4100017: CITY OF BELMONT

Permit Status: Issued [View Permit History]

[View Notes] [Save] [Cancel]

About This Permit

Type:	Restricted Materials	Permit Year:	2010	Effective Date:	2/10/2010
		Issue Date:	2/10/2010	Expiration Date:	12/31/2010
Number:	4100017	Version #:	1	Issuing Officer:	
District:	RC	Ag/Non-Ag	Agricultural Use		
Seasonal		Possession & Use			
NOI must be submitted at least 24 hours prior to a planned application of a Restricted Material					
Employee Handles Pesticides			Field Worker Codes:		

Permittee: Operator Contact Information

Operator: G: 4100017 CITY OF BELMONT	
Name:	CITY OF BELMONT
Mailing Address 1:	30 TWIN PINES LANE
Mailing Address 2:	
City:	BELMONT
State - Zip:	CA 94002-
Primary Phone:	(650)595-7441
Alternate Phone:	(650)595-7442
Cell Phone:	() -
Fax Number:	(650)595-7419
Agent Name:	OURTIAGUE, DANIEL
Physical Address 1:	30 TWIN PINES LANE
Physical Address 2:	
City:	BELMONT
State - Zip:	94002
Email:	dourtague@belmont.gov

[View Notes] [Save] [Cancel]

Note: This is a confidential web portal, unauthorized access is strictly prohibited. Connections are logged.
Suggestions?





Home Product Lookup PUR/NOI Query RMP - Op-ID Pesticide Use Report Help

Active Permit: 4100017
Active Site:

You are logged in as: city of belmont
Change Password Change Q and A Logout

- General Info
- Contacts
- Pesticides
- Commodities
- Sites
- Conditions
- Print Permit
- PURs by Permit

Quick Find: Permit

Enter Number or Permittee: 4100017: CITY OF BELMONT

Permit Status: Issued [View Permit History]

[View Notes] [Save] [Cancel]

About This Permit

Type:	Restricted Materials	Permit Year:	2011	Effective Date:	12/15/2010
		Issue Date:	12/15/2010	Expiration Date:	12/31/2011
Number:	4100017	Version #:	1	Issuing Officer:	
District:	RC	Ag/Non-Ag	Agricultural Use		
Seasonal		Possession & Use			
NOI must be submitted at least 24 hours prior to a planned application of a Restricted Material					
Employee Handles Pesticides			Field Worker Codes:		

Permittee: Operator Contact Information

Operator: G: 4100017 CITY OF BELMONT	
Name:	CITY OF BELMONT
Mailing Address 1:	30 TWIN PINES LANE
Mailing Address 2:	
City:	BELMONT
State - Zip:	CA 94002-
Primary Phone:	(650)595-7441
Alternate Phone:	(650)595-7442
Cell Phone:	() -
Fax Number:	(650)595-7419
Agent Name:	OURTIAGUE, DANIEL
Physical Address 1:	30 TWIN PINES LANE
Physical Address 2:	
City:	BELMONT
State - Zip:	94002
Email:	dourtague@belmont.gov

[View Notes] [Save] [Cancel]

Note: This is a confidential web portal, unauthorized access is strictly prohibited. Connections are logged.
Suggestions?





San Mateo

Home Product Lookup PUR/NOI Query RMP - Op-ID Pesticide Use Report Help

Active Permit: 4100017
Active Site:

You are logged in as: city of belmont
Change Password Change Q and A Logout

- General Info
- Contacts
- Pesticides
- Commodities
- Sites
- Conditions
- Print Permit
- PURs by Permit

Quick Find: Permit

Enter Number or Permittee: 4100017: CITY OF BELMONT

Permit Status: Revised [View Permit History]

[View Notes] [Save] [Cancel]

About This Permit

Type:	Operator Identification Number	Permit Year:	2012	Effective Date:	1/10/2012
Number:	4100017	Issue Date:		Expiration Date:	12/31/2012
District:	MCO	Version #:	1	Issuing Officer:	Jeremy Eide
		Ag/Non-Ag	Agricultural Use		
Employee Handles Pesticides		Field Worker Codes:			

Permittee: Operator Contact Information

Operator: G: 4100017 CITY OF BELMONT	
Name: CITY OF BELMONT	Agent Name: CORNELL,PATRICK
Mailing Address 1: 30 TWIN PINES LANE	Physical Address 1: 500 ISLAND PARKWAY
Mailing Address 2:	Physical Address 2:
City: BELMONT	City: BELMONT
State - Zip: CA 94002-	State - Zip: 94002
Primary Phone: (650)595-7441	Email: PCornell@belmont.gov
Alternate Phone:	
Cell Phone: (650)642-8832	
Fax Number: (650)595-7419	

[View Notes] [Save] [Cancel]

Note: This is a confidential web portal, unauthorized access is strictly prohibited. Connections are logged.
Suggestions?





GREENPRO

Eco-Effective Pest Control

Presenting this certificate of excellence to

Clark Pest control

in acknowledgment of your continuing efforts toward professional excellence and environmental awareness in the pest management industry. You have met the GreenPro requirements for eco-effective pest control.

A handwritten signature in black ink that reads "Andrew Inghite".

official signature



Certified 7/29/2009 - 7/31/10

City of Belmont
Standard Operating Procedures for Pesticide Use and Implementation
Integrated Pest Management Policy

Purpose: To minimize the use and reliance on pesticides that threaten water quality by implementing the city's policy for Integrated Pest Management (IPM) by all municipal employees and contractors hired to manage pests on municipal property.

Policy: Municipal employees who are authorized to manage pests and those contracted to do so are required to implement the city's IPM policy for city-owned properties and facilities managed by the City of Belmont. This will be accomplished by using the following procedures:

1. Use cultural practices and pest prevention measures to minimize the occurrence of pest problems.
2. Set a threshold of tolerance for pests.
3. Use biological and physical controls that are environmentally appropriate and economically feasible to control pests.
4. Use chemical control as a last resort, and then the least toxic product will be used. Where feasible for structural pest control, insecticides will be applied as containerized baits.
5. Avoid the use of pesticides that threaten water quality¹ especially in formulations and situations that pose a risk of contaminating storm water runoff.
6. Train employees on IPM techniques, pesticides-related storm water pollution prevention methods, the municipality's IPM policy and these standard operating procedures.
7. As part of the municipality's annual report for the municipal regional storm water permit, report on the IPM policy's implementation by showing trends in the quantities and types of pesticides used and suggest reasons for any increases in uses of pesticides that threaten water quality¹ (as required by municipal regional storm water permit Provision C.9.b.).

Responsible Parties: All city personnel that as part of their municipal job duties are authorized to plan, manage, and control pests including pesticide applications and all city personnel that administer municipal contracts for applying pesticide on municipal property.

Contracts & Contractors: Contracts shall include a requirement that the contractor shall adhere to the city's IPM policy. This will be accomplished by using the following procedures:

1. Include a copy or link to the municipality's IPM policy in the contractor solicitation documents, e.g., Request for Proposal or Request for Quote, and make it clear that the pest control services being solicited must comply with the City's IPM policy.
2. Include a copy of the municipality's IPM policy in the contract's specifications.
3. Meet with the contractor to review the City's IPM policy.

¹ The municipal regional stormwater permit identifies the following pesticides as having a concern to water quality: "organophosphorous pesticides (chlorpyrifos, diazinon, and malathion); pyrethroids (bifenthrin, cyfluthrin, beta-cyfluthrin, cypermethrin, deltamethrin, esfenvalerate, lambda-cyfluthrin, beta-cyfluthrin, cypermethrin, deltamethrin, esfenvalerate, lambda-cyhalothrin, permethrin, and tralomethrin); carbamates (e.g., carbaryl); and fipronil." (Provision C.9)



California Environmental Protection Agency
Department of Pesticide Regulation

IPM Innovator

Clark Pest Control

is hereby recognized as an “IPM Innovator” for its leadership
and creativity in advancing the use of reduced-risk programs for
urban pest management.


Mary-Ann Warmerdam, Director

18 March 2010
Date





NEWS

FOR IMMEDIATE RELEASE

February 02, 2012

CONTACT: (650) 595-7425

1 Twin Pines Lane, Belmont, CA 94002

Belmont Public Works, www.belmont.gov

pworks@belmont.gov

The City of Belmont has joined

“The Bay Area-wide Trash Capture Demonstration Project.”

Belmont, CA – In most Bay Area communities, curbside storm drain inlets (“catch basins”) are the entry points to the storm drain system. Urban runoff carries trash and debris into the storm drain system, which discharges to a creek or the Bay. Belmont is dealing with this pollution problem by participating in the Bay Area-wide Trash Capture Demonstration Project and modifying 35 catch basins with full capture connector pipe screens that block trash before it passes into the system. With the devices installed, runoff water will still be able to pass through, but trash will be captured in the inlets which staff will clean out periodically.

Work started in March 2011 with three test devices, and an additional 32 more devices were installed by November 2011. Multiple locations in the commercial and retail areas were selected for the newly retrofitted storm drains. Research shows that these areas generate much of the trash that pollutes local waters.

The Bay Area-wide Trash Capture Demonstration Project is a collaboration of local, state, and federal agencies working to protect the environment. Funding for this effort has been provided in full or in part by the American Recovery and Reinvestment Act of 2009 and the Clean Water State Revolving Fund, through an agreement with the State Water Resources Control Board and the Estuary Partnership.

Capturing trash is a Municipal Regional Permit requirement of the San Francisco Bay Regional Water Quality Control Board. The current storm water permit, which covers the bay area Counties, requires each municipality to reduce trash in local creeks and trash “hotspots” by 40 percent by 2014. The 35 full capture devices will provide Belmont 17 percent of the 40 percent reduction.

#

Distribution:

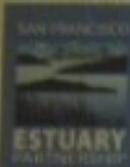
The San Mateo County Times

The San Mateo Daily Journal

The Daily Post

The Examiner/Independent

Council, Commissioners, Chamber, Neighborhood Assoc. Presidents, SMT, PIC, web



Belmont
has joined
**The Bay Area-wide Trash Capture
Demonstration Project**

*It's up to all of us to keep trash out of
Bay Area creeks, the Bay, and
the Pacific Ocean!*

Participating municipalities receive trash capture devices and share information about their effectiveness.



Funding for this project has been provided in full or in part by the American Recovery and Reinvestment Act of 2009 and the Clean Water State Revolving Fund, through an agreement with the State Water Resources Control Board.

www.sfestuary.org



Trash Hot Spot Cleanup Data Collection Form

I. Site Information

Site ID# BelCk1049 Name of Creek or Shoreline: Belmont Creek
 Site Location: 1049 Alameda Lat: N 37° 30.625' Long: W 122° 17.553' Watershed: Belmont Creek
 Ownership: Carlmont Shopping Jurisdiction(s): City of Belmont April 21, 2012

II. Trash Information

1. Describe trash types. Identify and rank the five most dominant types of trash (1-5, 1 being the most prevalent in terms of volume). Trash types shown with asterisks are defined on page 2. The identification of the types of trash and their relative dominance or prevalence may be estimated prior to clean up by walking the length of the hot spot (up and back) and visually estimating the types of trash present.

<u>1</u> Plastic bags	___ Cigarette butts	___ Miscellaneous Items*
<u>2</u> Other plastic products*	___ Spray paint cans	___ Fabric and cloth*
<u>4</u> Convenience/fast food items*	___ Metal products*	___ Yard waste
<u>3</u> Bottles (plastic or glass)	___ Biohazards*	___ Leaf litter piles
___ Aluminum cans	___ Construction debris*	___ Glass pieces
___ Styrofoam (pieces or pellets)	___ Toxic substances*	___ Golf or tennis balls
<u>5</u> Paper and cardboard*	___ Large items*	___ Other* (describe) _____

2. Potential trash pathways/sources (**Check all that apply**):

<input type="checkbox"/> Trash accumulation from upstream sources	<input checked="" type="checkbox"/> Illegal dumping	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Shoreline accumulation from other sources	<input type="checkbox"/> Homeless encampments _____	<input type="checkbox"/> Unknown _____
<input checked="" type="checkbox"/> Littering	<input type="checkbox"/> Storm drain outfall _____	

3. Identify land uses adjacent to trash hot spot: Residential (Single-family) Residential (High-density) Commercial
 Industrial Public/Institutional Mixed-use Other Developed

III. Trash Removal

Quantify Total Volume of Non-Compacted Trash Removed During Cleanup

Size of trash bag (in gallons): 40

Total # of bags: 4 Calculate Total Cubic Yards (approx. 202 gallons = 1 cubic yd) .8

IV. Photo Documentation

Photo#	Before Cleanup Photograph Segment ID	Photo#	After Cleanup Photograph Segment ID

Notes: Seasonal vegetation is not gathered as part of trash cleanup.

Trash Hot Spot Cleanup Data Collection Form Guidance and Definitions

Data Requested	Guidance and Definitions
I. Site Information	
Site ID #	The unique identification number assigned to the site. The site ID# will be used to track trash hot spot activities within databases or other tabular formats.
Name of Creek or Shoreline	Provide the name of the creek or shoreline.
Site Location	The exact physical location of the upstream and/or downstream ends of the trash hot spot in relation to roads and/or physical landmarks (e.g., bridge crossings, outfalls) on the creek (e.g., Colma Creek at Utah Avenue extending upstream for 300 feet) Alternatively, for larger hot spots, provide a length of creek between two different roads/bridge crossings or other physical landmarks (e.g., San Mateo Creek between Fremont St. and S Humboldt St.).
Latitude	The geographic coordinate north of the equator. Latitude should be taken at the downstream end of the trash hot spot (preferably in decimal degrees to at least four decimal places) with a GPS receiver. Record the datum setting of the unit preferably in NAD83/ WGS84.
Longitude	The geographic coordinate west of the prime meridian (0 degrees longitude). Longitude should be taken at the downstream end of the trash hot spot (preferably in decimal degrees to at least four decimal places) with a GPS receiver. Record the datum setting of the unit preferably in NAD83/ WGS84.
Watershed	The watershed where the trash hot spot is located. Use Oakland Museum of California maps if watershed is identified on one of these maps.
Ownership	The owner of the land where the trash hot spot is located. Possible answers are San Mateo County Flood Control District or other public agency, private, or unknown.
Jurisdiction(s)	The jurisdiction(s) responsible for trash hot spot assessment and cleanup. Multiple jurisdictions may exist for certain creeks, such as San Francisquito Creek.
II. Trash Information	
<i>1. Trash Types</i>	
Convenience/Fast Food Items	Waste packaging, (i.e., plastic or paper) from convenience foods (e.g., potato chips, snack foods, candy bars, gum, etc.) and other wastes (e.g., bags, napkins, etc.) generated from fast food establishments or carry out restaurants.
Other Plastic Products	Plastic bottle caps, plastic cup lid/straw, plastic six-pack rings, plastic wrappers, hard or soft plastic pieces, fishing line, tarp, plastic pipe.
Paper and Cardboard	Cups, boxes, newspaper, magazines, mail flyers, and all other products made of paper or cardboard.
Metal Products	Aluminum foil, aluminum or steel cans, metal bottle caps, pieces of metal pipe, auto parts, wire (e.g., chicken, barb, etc.), and metal objects.
Biohazards	Human wastes/diapers, pet wastes, syringes or pipettes, dead animals
Construction Debris	Disposed concrete pieces, rebar, sheet rock, bricks, wood debris
Toxic Substances	Chemical containers, oil containers, lighters, batteries, pesticide containers
Large Items	Appliances, furniture, garbage bags of trash, tires, shopping carts
Miscellaneous Items	Synthetic rubber, foam rubber, balloons, ceramic pots/shards, pieces of hoses
Fabric and cloth	Synthetic or natural fabric, rags, and clothing
<i>2. Trash Pathways /Sources</i>	
Trash Accumulation from Upstream Sources	Litter/trash observed to have accumulated below the high water line. Litter/trash may be worn and aged in appearance; consists of light-weight, persistent and buoyant trash items (e.g., plastic bags, plastic bottle); and observed caught in surrounding vegetation, tree branches, and rocks.
Shoreline Accumulation from Other Sources	Consists of light-weight, persistent and buoyant trash items (e.g., plastic containers, wood, floats) that have accumulated on the shoreline with no obvious local source.
Littering	Improperly disposed/discarded smaller-sized wastes or other items observed in creek channels and/or creek banks. Litter appears relatively "new" in appearance and it is usually located at road over crossings and other areas accessible to the public.
Illegal Dumping	Illegal dumping or discarding of larger quantities/sizes of litter/trash directly into a waterway or in close proximity to a creek. Examples are trash bags with wastes, appliances, mattresses, furniture, tires, rugs, shopping carts, and other large items.
Homeless Encampments	Areas where homeless people live or congregate along creeks and under road over crossings.
Storm Drain Outfall	The point where the storm drain system discharges usually from a pipe into a creek or shoreline.
Other	All other potential sources not described above.
Unknown	Trash sources cannot be determined.

Data Requested	Guidance and Definitions
<i>3. Adjacent Land Uses to Trash Hot Spot</i>	
Adjacent Land Uses to Trash Hot Spot	Indicate the land uses in the areas adjacent to the trash hot spot.
III. Trash Removal	
Size of Trash Bag (in gallons)	Provide the gallon size of the trash bags used to remove trash during cleanup.
Total # Bags	List the total number of bags of trash removed during cleanup.
Cubic Yards	The MRP requires that the total volume of trash remove be quantified. Calculate how much trash was removed in cubic yards
IV. Photo Documentation	
Photo #	The number assigned to a photograph taken to depict trash conditions before or after trash cleanup. See Photograph Documentation Protocol. At creek hot spots that are 300 ft. in length a total of 12 photographs (6 before cleanup and 6 after cleanup) are required. At shoreline hot spots that are 600 ft. in length a total of 24 photographs (12 before cleanup and 12 after cleanup) are required.
Segment ID	The segment ID is described in the Photograph Documentation Protocol. The every 50 ft. segment ID (i.e., A-L) is used to identify where the photograph was taken to document trash conditions either before or after cleanup.
Optional Photographs of Trashed Cleaned Up	Optional photographs may be taken to illustrate the volume of trash collected during the cleanup.
Notes	Comments or other notes may be added regarding photo documentation.



Trash Hot Spot Cleanup Data Collection Form

I. Site Information

Site ID# One1355 Name of Creek or Shoreline: Belmont Creek/O'Neil Slough
 Site Location: 1355 Shoreway Lat: N 37° 31.353' Long: W 122° 15.831' Watershed: Belmont Creek
 Ownership: Waters of State Jurisdiction(s): City of Belmont April 21, 2012

II. Trash Information

1. Describe trash types. Identify and rank the five most dominant types of trash (1-5, 1 being the most prevalent in terms of volume). Trash types shown with asterisks are defined on page 2. The identification of the types of trash and their relative dominance or prevalence may be estimated prior to clean up by walking the length of the hot spot (up and back) and visually estimating the types of trash present.

- | | | |
|---------------------------------------|--------------------------|-----------------------------|
| <u>1</u> Plastic bags | ___ Cigarette butts | ___ Miscellaneous Items* |
| <u>2</u> Other plastic products* | ___ Spray paint cans | ___ Fabric and cloth* |
| <u>5</u> Convenience/fast food items* | ___ Metal products* | ___ Yard waste |
| <u>4</u> Bottles (plastic or glass) | ___ Biohazards* | ___ Leaf litter piles |
| ___ Aluminum cans | ___ Construction debris* | ___ Glass pieces |
| ___ Styrofoam (pieces or pellets) | ___ Toxic substances* | ___ Golf or tennis balls |
| <u>3</u> Paper and cardboard* | ___ Large items* | ___ Other* (describe) _____ |

2. Potential trash pathways/sources (**Check all that apply**):

- | | | |
|---|---|--|
| <input type="checkbox"/> Trash accumulation from upstream sources | <input type="checkbox"/> Illegal dumping | <input type="checkbox"/> Other _____ |
| <input checked="" type="checkbox"/> Shoreline accumulation from other sources | <input type="checkbox"/> Homeless encampments _____ | <input type="checkbox"/> Unknown _____ |
| <input checked="" type="checkbox"/> Littering | <input type="checkbox"/> Storm drain outfall _____ | |

3. Identify land uses adjacent to trash hot spot: Residential (Single-family) Residential (High-density) Commercial
 Industrial Public/Institutional Mixed-use Other Developed

III. Trash Removal

Quantify Total Volume of Non-Compacted Trash Removed During Cleanup

Size of trash bag (in gallons): 40
 Total # of bags: 2 Calculate Total Cubic Yards (approx. 202 gallons = 1 cubic yd) .4

IV. Photo Documentation

Photo#	Before Cleanup Photograph Segment ID	Photo#	After Cleanup Photograph Segment ID

Notes: Ongoing cleanup was being performed weekly before this, so trash did not accumulate.

Trash Hot Spot Cleanup Data Collection Form Guidance and Definitions

Data Requested	Guidance and Definitions
I. Site Information	
Site ID #	The unique identification number assigned to the site. The site ID# will be used to track trash hot spot activities within databases or other tabular formats.
Name of Creek or Shoreline	Provide the name of the creek or shoreline.
Site Location	The exact physical location of the upstream and/or downstream ends of the trash hot spot in relation to roads and/or physical landmarks (e.g., bridge crossings, outfalls) on the creek (e.g., Colma Creek at Utah Avenue extending upstream for 300 feet) Alternatively, for larger hot spots, provide a length of creek between two different roads/bridge crossings or other physical landmarks (e.g., San Mateo Creek between Fremont St. and S Humboldt St.).
Latitude	The geographic coordinate north of the equator. Latitude should be taken at the downstream end of the trash hot spot (preferably in decimal degrees to at least four decimal places) with a GPS receiver. Record the datum setting of the unit preferably in NAD83/ WGS84.
Longitude	The geographic coordinate west of the prime meridian (0 degrees longitude). Longitude should be taken at the downstream end of the trash hot spot (preferably in decimal degrees to at least four decimal places) with a GPS receiver. Record the datum setting of the unit preferably in NAD83/ WGS84.
Watershed	The watershed where the trash hot spot is located. Use Oakland Museum of California maps if watershed is identified on one of these maps.
Ownership	The owner of the land where the trash hot spot is located. Possible answers are San Mateo County Flood Control District or other public agency, private, or unknown.
Jurisdiction(s)	The jurisdiction(s) responsible for trash hot spot assessment and cleanup. Multiple jurisdictions may exist for certain creeks, such as San Francisquito Creek.
II. Trash Information	
<i>1. Trash Types</i>	
Convenience/Fast Food Items	Waste packaging, (i.e., plastic or paper) from convenience foods (e.g., potato chips, snack foods, candy bars, gum, etc.) and other wastes (e.g., bags, napkins, etc.) generated from fast food establishments or carry out restaurants.
Other Plastic Products	Plastic bottle caps, plastic cup lid/straw, plastic six-pack rings, plastic wrappers, hard or soft plastic pieces, fishing line, tarp, plastic pipe.
Paper and Cardboard	Cups, boxes, newspaper, magazines, mail flyers, and all other products made of paper or cardboard.
Metal Products	Aluminum foil, aluminum or steel cans, metal bottle caps, pieces of metal pipe, auto parts, wire (e.g., chicken, barb, etc.), and metal objects.
Biohazards	Human wastes/diapers, pet wastes, syringes or pipettes, dead animals
Construction Debris	Disposed concrete pieces, rebar, sheet rock, bricks, wood debris
Toxic Substances	Chemical containers, oil containers, lighters, batteries, pesticide containers
Large Items	Appliances, furniture, garbage bags of trash, tires, shopping carts
Miscellaneous Items	Synthetic rubber, foam rubber, balloons, ceramic pots/shards, pieces of hoses
Fabric and cloth	Synthetic or natural fabric, rags, and clothing
<i>2. Trash Pathways /Sources</i>	
Trash Accumulation from Upstream Sources	Litter/trash observed to have accumulated below the high water line. Litter/trash may be worn and aged in appearance; consists of light-weight, persistent and buoyant trash items (e.g., plastic bags, plastic bottle); and observed caught in surrounding vegetation, tree branches, and rocks.
Shoreline Accumulation from Other Sources	Consists of light-weight, persistent and buoyant trash items (e.g., plastic containers, wood, floats) that have accumulated on the shoreline with no obvious local source.
Littering	Improperly disposed/discarded smaller-sized wastes or other items observed in creek channels and/or creek banks. Litter appears relatively "new" in appearance and it is usually located at road over crossings and other areas accessible to the public.
Illegal Dumping	Illegal dumping or discarding of larger quantities/sizes of litter/trash directly into a waterway or in close proximity to a creek. Examples are trash bags with wastes, appliances, mattresses, furniture, tires, rugs, shopping carts, and other large items.
Homeless Encampments	Areas where homeless people live or congregate along creeks and under road over crossings.
Storm Drain Outfall	The point where the storm drain system discharges usually from a pipe into a creek or shoreline.
Other	All other potential sources not described above.
Unknown	Trash sources cannot be determined.

Data Requested	Guidance and Definitions
<i>3. Adjacent Land Uses to Trash Hot Spot</i>	
Adjacent Land Uses to Trash Hot Spot	Indicate the land uses in the areas adjacent to the trash hot spot.
III. Trash Removal	
Size of Trash Bag (in gallons)	Provide the gallon size of the trash bags used to remove trash during cleanup.
Total # Bags	List the total number of bags of trash removed during cleanup.
Cubic Yards	The MRP requires that the total volume of trash remove be quantified. Calculate how much trash was removed in cubic yards
IV. Photo Documentation	
Photo #	The number assigned to a photograph taken to depict trash conditions before or after trash cleanup. See Photograph Documentation Protocol. At creek hot spots that are 300 ft. in length a total of 12 photographs (6 before cleanup and 6 after cleanup) are required. At shoreline hot spots that are 600 ft. in length a total of 24 photographs (12 before cleanup and 12 after cleanup) are required.
Segment ID	The segment ID is described in the Photograph Documentation Protocol. The every 50 ft. segment ID (i.e., A-L) is used to identify where the photograph was taken to document trash conditions either before or after cleanup.
Optional Photographs of Trashed Cleaned Up	Optional photographs may be taken to illustrate the volume of trash collected during the cleanup.
Notes	Comments or other notes may be added regarding photo documentation.

I. Site Information

Site ID# BelCk1049 Name of Creek or Shoreline: Belmont Creek
 Site Location: 1049 Alameda Lat: N 37° 30.625' Long: W 122° 17.553' Watershed: Belmont Creek
 Ownership: Carlmont Shopping Jurisdiction(s): City of Belmont September 20, 2011

II. Trash Information

1. Describe trash types. Identify and rank the five most dominant types of trash (1-5, 1 being the most prevalent in terms of volume). Trash types shown with asterisks are defined on page 2. The identification of the types of trash and their relative dominance or prevalence may be estimated prior to clean up by walking the length of the hot spot (up and back) and visually estimating the types of trash present.

<u>4</u> Plastic bags	___ Cigarette butts	___ Miscellaneous Items*
<u>3</u> Other plastic products*	___ Spray paint cans	___ Fabric and cloth*
___ Convenience/fast food items*	___ Metal products*	___ Yard waste
<u>5</u> Bottles (plastic or glass)	___ Biohazards*	___ Leaf litter piles
___ Aluminum cans	___ Construction debris*	___ Glass pieces
___ Styrofoam (pieces or pellets)	___ Toxic substances*	___ Golf or tennis balls
<u>2</u> Paper and cardboard*	___ Large items*	<u>1</u> Other* (describe) <u>2 shopping carts</u>

2. Potential trash pathways/sources (Check all that apply):

<input type="checkbox"/> Trash accumulation from upstream sources	<input checked="" type="checkbox"/> Illegal dumping	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Shoreline accumulation from other sources	<input type="checkbox"/> Homeless encampments _____	<input type="checkbox"/> Unknown _____
<input checked="" type="checkbox"/> Littering	<input type="checkbox"/> Storm drain outfall _____	

3. Identify land uses adjacent to trash hot spot: Residential (Single-family) Residential (High-density) Commercial
 Industrial Public/Institutional Mixed-use Other Developed

III. Trash Removal

Quantify Total Volume of Non-Compacted Trash Removed During Cleanup

Size of trash bag (in gallons): 10
 Total # of bags: 20 Calculate Total Cubic Yards (approx. 202 gallons = 1 cubic yd) 1

IV. Photo Documentation

Photo#	Before Cleanup Photograph Segment ID	Photo#	After Cleanup Photograph Segment ID

Notes: Seasonal vegetation is not gathered as part of trash cleanup.

Trash Hot Spot Cleanup Data Collection Form Guidance and Definitions

Data Requested	Guidance and Definitions
I. Site Information	
Site ID #	The unique identification number assigned to the site. The site ID# will be used to track trash hot spot activities within databases or other tabular formats.
Name of Creek or Shoreline	Provide the name of the creek or shoreline.
Site Location	The exact physical location of the upstream and/or downstream ends of the trash hot spot in relation to roads and/or physical landmarks (e.g., bridge crossings, outfalls) on the creek (e.g., Colma Creek at Utah Avenue extending upstream for 300 feet) Alternatively, for larger hot spots, provide a length of creek between two different roads/bridge crossings or other physical landmarks (e.g., San Mateo Creek between Fremont St. and S Humboldt St.).
Latitude	The geographic coordinate north of the equator. Latitude should be taken at the downstream end of the trash hot spot (preferably in decimal degrees to at least four decimal places) with a GPS receiver. Record the datum setting of the unit preferably in NAD83/ WGS84.
Longitude	The geographic coordinate west of the prime meridian (0 degrees longitude). Longitude should be taken at the downstream end of the trash hot spot (preferably in decimal degrees to at least four decimal places) with a GPS receiver. Record the datum setting of the unit preferably in NAD83/ WGS84.
Watershed	The watershed where the trash hot spot is located. Use Oakland Museum of California maps if watershed is identified on one of these maps.
Ownership	The owner of the land where the trash hot spot is located. Possible answers are San Mateo County Flood Control District or other public agency, private, or unknown.
Jurisdiction(s)	The jurisdiction(s) responsible for trash hot spot assessment and cleanup. Multiple jurisdictions may exist for certain creeks, such as San Francisquito Creek.
II. Trash Information	
<i>1. Trash Types</i>	
Convenience/Fast Food Items	Waste packaging, (i.e., plastic or paper) from convenience foods (e.g., potato chips, snack foods, candy bars, gum, etc.) and other wastes (e.g., bags, napkins, etc.) generated from fast food establishments or carry out restaurants.
Other Plastic Products	Plastic bottle caps, plastic cup lid/straw, plastic six-pack rings, plastic wrappers, hard or soft plastic pieces, fishing line, tarp, plastic pipe.
Paper and Cardboard	Cups, boxes, newspaper, magazines, mail flyers, and all other products made of paper or cardboard.
Metal Products	Aluminum foil, aluminum or steel cans, metal bottle caps, pieces of metal pipe, auto parts, wire (e.g., chicken, barb, etc.), and metal objects.
Biohazards	Human wastes/diapers, pet wastes, syringes or pipettes, dead animals
Construction Debris	Disposed concrete pieces, rebar, sheet rock, bricks, wood debris
Toxic Substances	Chemical containers, oil containers, lighters, batteries, pesticide containers
Large Items	Appliances, furniture, garbage bags of trash, tires, shopping carts
Miscellaneous Items	Synthetic rubber, foam rubber, balloons, ceramic pots/shards, pieces of hoses
Fabric and cloth	Synthetic or natural fabric, rags, and clothing
<i>2. Trash Pathways /Sources</i>	
Trash Accumulation from Upstream Sources	Litter/trash observed to have accumulated below the high water line. Litter/trash may be worn and aged in appearance; consists of light-weight, persistent and buoyant trash items (e.g., plastic bags, plastic bottle); and observed caught in surrounding vegetation, tree branches, and rocks.
Shoreline Accumulation from Other Sources	Consists of light-weight, persistent and buoyant trash items (e.g., plastic containers, wood, floats) that have accumulated on the shoreline with no obvious local source.
Littering	Improperly disposed/discarded smaller-sized wastes or other items observed in creek channels and/or creek banks. Litter appears relatively "new" in appearance and it is usually located at road over crossings and other areas accessible to the public.
Illegal Dumping	Illegal dumping or discarding of larger quantities/sizes of litter/trash directly into a waterway or in close proximity to a creek. Examples are trash bags with wastes, appliances, mattresses, furniture, tires, rugs, shopping carts, and other large items.
Homeless Encampments	Areas where homeless people live or congregate along creeks and under road over crossings.
Storm Drain Outfall	The point where the storm drain system discharges usually from a pipe into a creek or shoreline.
Other	All other potential sources not described above.
Unknown	Trash sources cannot be determined.

Data Requested	Guidance and Definitions
<i>3. Adjacent Land Uses to Trash Hot Spot</i>	
Adjacent Land Uses to Trash Hot Spot	Indicate the land uses in the areas adjacent to the trash hot spot.
III. Trash Removal	
Size of Trash Bag (in gallons)	Provide the gallon size of the trash bags used to remove trash during cleanup.
Total # Bags	List the total number of bags of trash removed during cleanup.
Cubic Yards	The MRP requires that the total volume of trash remove be quantified. Calculate how much trash was removed in cubic yards
IV. Photo Documentation	
Photo #	The number assigned to a photograph taken to depict trash conditions before or after trash cleanup. See Photograph Documentation Protocol. At creek hot spots that are 300 ft. in length a total of 12 photographs (6 before cleanup and 6 after cleanup) are required. At shoreline hot spots that are 600 ft. in length a total of 24 photographs (12 before cleanup and 12 after cleanup) are required.
Segment ID	The segment ID is described in the Photograph Documentation Protocol. The every 50 ft. segment ID (i.e., A-L) is used to identify where the photograph was taken to document trash conditions either before or after cleanup.
Optional Photographs of Trashed Cleaned Up	Optional photographs may be taken to illustrate the volume of trash collected during the cleanup.
Notes	Comments or other notes may be added regarding photo documentation.

I. Site Information

Site ID# One1355 Name of Creek or Shoreline: Belmont Creek/O'Neil Slough
 Site Location: 1355 Shoreway Lat: N 37° 31.353' Long: W 122° 15.831' Watershed: Belmont Creek
 Ownership: Waters of State Jurisdiction(s): City of Belmont September 20, 2011

II. Trash Information

1. Describe trash types. Identify and rank the five most dominant types of trash (1-5, 1 being the most prevalent in terms of volume). Trash types shown with asterisks are defined on page 2. The identification of the types of trash and their relative dominance or prevalence may be estimated prior to clean up by walking the length of the hot spot (up and back) and visually estimating the types of trash present.

<u>3</u> Plastic bags	___ Cigarette butts	___ Miscellaneous Items*
<u>1</u> Other plastic products*	___ Spray paint cans	___ Fabric and cloth*
<u>5</u> Convenience/fast food items*	___ Metal products*	___ Yard waste
<u>4</u> Bottles (plastic or glass)	___ Biohazards*	___ Leaf litter piles
___ Aluminum cans	___ Construction debris*	___ Glass pieces
___ Styrofoam (pieces or pellets)	___ Toxic substances*	___ Golf or tennis balls
<u>2</u> Paper and cardboard*	___ Large items*	___ Other* (describe) _____

2. Potential trash pathways/sources (**Check all that apply**):

<input type="checkbox"/> Trash accumulation from upstream sources	<input type="checkbox"/> Illegal dumping	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Shoreline accumulation from other sources	<input type="checkbox"/> Homeless encampments _____	<input type="checkbox"/> Unknown _____
<input checked="" type="checkbox"/> Littering	<input type="checkbox"/> Storm drain outfall _____	

3. Identify land uses adjacent to trash hot spot: Residential (Single-family) Residential (High-density) Commercial
 Industrial Public/Institutional Mixed-use Other Developed

III. Trash Removal

Quantify Total Volume of Non-Compacted Trash Removed During Cleanup

Size of trash bag (in gallons): 10

Total # of bags: 5 Calculate Total Cubic Yards (approx. 202 gallons = 1 cubic yd) .25

IV. Photo Documentation

Photo#	Before Cleanup Photograph Segment ID	Photo#	After Cleanup Photograph Segment ID

Notes: Ongoing cleanup was being performed weekly before this, so trash did not accumulate.

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Notes	Comments or other notes may be added regarding photo documentation.

SITE LOCATION	PLANNED OR UNPLANNED	DISCHARGE TYPE	RECEIVING WATER	DATE	START TIME	END TIME	EST. VOLUME	EST. DAILY FLOW RATE	*1 RES	*2 PH	*3 TURBIDITY	R-W TURBIDITY	*5 BMPS	
2941 MONTE CRESTA	UNPLANNED	LEAK	SF BAY	6/20/11	100	0800	1,800	360	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
1546 NOTRE DAME	UNPLANNED	LINE BREAK	SF BAY	7/15/11	0000	0830	35,000	35,000	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
1200 NOTRE DAME	UNPLANNED	LINE BREAK	SF BAY	7/23/11	0200	0430	23,000	23,000	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
15154 POLSER DR	UNPLANNED	LEAK	SF BAY	8/25/11	1000	1600	3,500	3,500	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
2024 ARBOR	UNPLANNED	LINE BREAK	SF BAY	8/28/11	0900	1100	19,000	19,000	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
300 ELCAMINO	UNPLANNED	LINE BREAK	SF BAY	8/31/11	1530	2030	48,500	48,500	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
2024 ARBOR	UNPLANNED	LINE BREAK	SF BAY	9/29/11	1330	1430	25,000	25,000	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
3202 UPPER LOCK	UNPLANNED	LINE BREAK	SF BAY	10/19/11	0740	1100	8,500	8,500	0mg/L	7.8	<1.0	<1.0	Dechlor Tabs/Filter Fabric @ DI	
3013 SAN JUAN	UNPLANNED	LEAK	SF BAY	12/10/11	0830	1030	4,200	4,200	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
238 SHELFORD	UNPLANNED	LEAK	SF BAY	12/26/11	1400	1000	15,000	15,000	0mg/L	7.8	<1.0	<1.0	Dechlor Tabs/Filter Fabric @ DI	
19 TIOGA WAY	UNPLANNED	LINE BREAK	SF BAY	1/15/12	0100	0300	21,000	21,000	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
2020 UPPER LOCK	UNPLANNED	LINE BREAK	SF BAY	1/17/12	1300	1430	6,500	6,500	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
100 KAREN RD	UNPLANNED	LINE BREAK	SF BAY	1/18/12	0730	1000	28,500	28,500	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
1100 CHULA VISTA	UNPLANNED	LEAK	SF BAY	1/20/12	0100	0400	8,250	8,250	0mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
1232 NORTH RD	UNPLANNED	LEAK	SF BAY	1/23/12	1830	0900	1,200	1,200	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
1609 NOTRE DAME	UNPLANNED	LINE BREAK	SF BAY	1/27/12	0630	1100	9,500	9,500	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
309 SUSSEX	UNPLANNED	LEAK	SF BAY	2/3/12	1300	1000	3,500	1,000	0 mg/L	7.8	<1.0	<1.0	Dechlor Tabs/Filter Fabric @ DI	
801 MIRAMAR TERRACE	PLANNED	WATER MAIN DEWATERING	SF BAY	3/8/12	1050	1100	750	750	0 mg/L	7.1	0.08	N/A	Dechlor Tabs/Filter Fabric @ DI	
28 WILLOW	UNPLANNED	LINE BREAK	SF BAY	3/19/12	0900	1900	18,500	18,500	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
100 CLPPER DR	UNPLANNED	FIRE HYDRANT SHEARING	SF BAY	3/25/12	0230	0300	35,000	35,000	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
100 CLPPER DR	PLANNED	FIRE HYDRANT FLUSHING	SF BAY	3/26/12	1000	1005	600	600	0 mg/L	N/A	7.2	0.05	N/A	Dechlor Tabs/Filter Fabric @ DI
1600 BELBURN	UNPLANNED	LINE BREAK	SF BAY	4/4/12	2330	0230	48,600	48,600	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	4/24/12	1130	1530	2,550	15,300	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	4/25/12	1130	1530	1,350	8,100	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	4/26/12	1300	1530	1,125	9,000	0 mg/L	8.1	<1.0	<1.0	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	4/27/12	0800	1600	3,525	10,575	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	4/30/12	1330	1530	40	480	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/1/12	1330	1630	675	5,400	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/2/12	1400	1600	1,600	19,200	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
1605 CLEE STREET	UNPLANNED	LEAK	SF BAY	5/3/12	1300	1000	4,500	1,125	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/3/12	1400	1600	825	9,900	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/4/12	1200	1600	1,725	10,350	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/7/12	0800	1630	6,225	18,675	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/10/12	1300	1600	3,450	27,600	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/14/12	0800	1600	1,575	4,725	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/16/12	1200	1600	750	4,500	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/17/12	0800	1600	5,100	15,300	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/18/12	0800	1600	2,025	6,075	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
ALL OVER BELMONT	PLANNED	CHLORINE TESTING / FLUSHING	SF BAY	5/23/12	0800	1600	3,100	9,300	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
1101 MUR WAY	UNPLANNED	LEAK	SF BAY	5/29/12	0800	1000	1,200	1,200	0 mg/L	N/A	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	
2552 SHERBOURNE	UNPLANNED	LEAK	SF BAY	6/2/12	0800	1045	2,500	2,500	0 mg/L	8.1	0.5	0.5	Dechlor Tabs/Filter Fabric @ DI	
522 WESSEX	PLANNED	MAN DISINFECTION	SF BAY	6/28/12	1300	1315	2,244	2,244	0 mg/L	7.9	N/A	N/A	Dechlor Tabs/Filter Fabric @ DI	

APRIL 2012 CL2 RESULTS	DEAD END FLUSHING/CHLORINE TESTING					2011	2012	2012
Street	Address	Page No.	Flush	Hydrant	Notes	Cl2 Res	Cl2 NEW	GAL.
Skymont Dr 4.24.12	4225 or 4227	1	B/O		1.5" M.I.P. Blow Off	2.1	1.97	150
Dionne Ct 4.24.12	3 or 5	2	B/O		2" F.I.P. Blow Off	2	2.01	300
Skymont Ct 4.24.12	6 or 7	2	B/O		2" F.I.P. Blow Off	2.1	2.1	300
Lori Ct 4.24.12	3254	3	HYD	7008	Use Hydrant	2.2	2.2	750
Lori Ct 4.24.12	3224	3	HYD	7007	Use Hydrant	2	2.31	300
Christian Ct 4.24.12	7 or 9	4	MTR		Used Blow off	2.1	1.99	150
Belmont Woods Reg 4.24.12	Regulator	14	REG		BUILD AREA TO FLUSH/TEST ZONES - Tested 2924 Blmt wood		2.1	0
St. James Rd 4.24.12	3100	8	HYD	8011	Fox School - Flush at hydrant	2.2	2.19	150
Heritage Ct 4.24.12	37 or 52	9	B/O	1810	2" F.I.P. Blow Off	2.2	2.2	150
Meadow Park Cir 4.24.12	48	9 & 16	B/O	8008	2" F.I.P. Blow Off	2	2.2	150
Rinconada Circle 4.24.12	45 or 60	10	B/O	8006	2" F.I.P. Blow Off	2.4	2.2	150
Waterloo Ct 4.25.12	22 or 18	28	HYD	8034	Use Hydrant	2.2	2.08	150
Waterloo Ct 4.25.12	37 or 46	28	HYD	8035	Use Hydrant	2	1.97	150
Soho Circle 4.25.12	5 or 10	27	HYD	8037	Use Hydrant	1.9	2.06	150
Paddington Ct 4.25.12	9 or 10	37	HYD	8039	Use Hydrant	2.2	2.05	150
Wakefield Ct 4.25.12	14 or 18	36	HYD	8048	Use Hydrant	2	2.09	150
Highlands Ct 4.25.12	11 or 15	47	HYD	8049	Use Hydrant	2.4	2.2	150
Haydon Ct 4.25.12	15 or 19	47	HYD	8054	Use Hydrant	2.1	2.13	150
Somerset Ct 4.25.12	11 or 14	47 & 60	HYD	8053	Use Hydrant	2.4	2.02	150
Hallmark Dr 4.25.12	2441	49	HYD	8063	End off Hallmark - Use Hydrant	2	1.85	150
Tioga Way 4.26.12	23 or 24	25	B/O		2" F.I.P. Blow Off	2.3	2.02	150
Bryce Ct 4.26.12	11 or 12	25	B/O		2" F.I.P. Blow Off	2.4	2.01	150
Lower Lock 4.26.12	3334	22 & 11	HYD	7036	Locate sewer to flush into	2.1	1.5	75
Marburger Ave 4.26.12	3135	23	HYD	7043	Locate sewer to flush into	1.5	1.77	600
Davis Dr 4.26.12	20	44 & 45	HYD	7067	Use Hydrant	1.5	1.58	150
Lyall Way 4.30.12	2351	57	MTR		Behind 1060 Continrntals Way		2	0
Lyall/Norman PI 4.27.12	2385	57	HYD	3008	Use Hydrant	1.6	1.85	150
Lyall Reg	Regulator	57	REG		BUILD AREA TO FLUSH/TEST ZONES			

Street	Address	Page No.	Flush	Hydrant	Notes	2011	2012	2012
						C12 RES	C12 NEW	GAL.
Carlmont Reg	Regulator	58	REG		BUILD AREA TO FLUSH/TEST ZONES			
Carlmont Dr 4.27.12	2632	71	HYD	2235	Flush 2234 then 2235 at trail	1.9	1.89	1,200
Mulberry Ct 4.27.12	15	68	HYD	2088	Use Hydrant	2	2	150
Alameda 4.30.12	1085	79	MTR		Shopping Center		2.08	0
Ralston Ave 4.27.12	2031	79	HYD	2070	Use Hydrant	2.3	1.47	150
Ralston Ave 4.30.12	1704	92	MTR				2.04	0
Ralston Ave 4.30.12	1632	92	MTR				1.3	0
Hastings Dr 4.27.12	HYDRANT	69	HYD	8064	Hydrant past 2211 Hastings	2.5	1.99	150
Cliffside Ct 4.27.12	11	69	HYD	8066	Use Hydrant	1.8	1.95	150
Cliffside Ct 4.27.12	26	69	HYD	8068	Use Hydrant	2.1	1.9	150
Ridgewood Ct 4.27.12	8 or 9	70	HYD	8070	Use Hydrant	2	1.88	150
Bridge Ct 4.27.12	11 or 14	71	HYD	8074	Use Hydrant	2.1	2.08	150
Parkridge Ct 4.27.12	13	83	HYD	8075	Use Hydrant	1.9	1.88	150
Witheridge Rd 4.27.12	300	84	B/O		2" F.I.P. Blow Off	1.6	1.82	150
Village Ct 4.27.12	2251	81	HYD	2080	Use Hydrant	1.9	2.2	375
Garden Ct 4.30.12	10 or 14	81	MTR		10 Garden Ct.		2.01	20
Solana Ct 4.27.12	8 or 12	104	HYD	2213	Use Hydrant	2	2.02	150
Desvio Way 4.27.12	1532 or 1536	115			INSTALL 2"	2	1.63	150
Solana Dr 4.27.12	1530 or 1531	115			INSTALL 2"	2.2	2.2	150
Lyndhurst Ct 4.30.12	9	115	HYD	5004	Use Hydrant	2.3	1.71	20
Shelford Ave 5.1.12	239	125	HYD	5814	HYDRANT ABANDONED	N/A	N/A	N/A
Buckland Ct 4.30.12	30 or 35	125	MTR		35 Buckland Ct		1.5	0
Dartmouth Ave 5.1.12	90	125			INSTALL 2"		1.7	0
Dartmouth Ave 5.1.12	59	125	HYD	6002	Use Hydrant	2.2	1.86	150
Shelford Hydrant 5.1.12	430 Erlin	124	HYD	5017	Use Hydrant	1.5	1.57	300
Erlin Dr 5.1.12	430	124			INSTALL 2" ON SHELFORD		1.28	0
Shelford Ave 5.1.12	490	125 & 136	B/O		2" F.I.P. Blow Off	1.9	1.84	225
Hartford Ave 5.1.12	80 or 90	124	MTR				1.81	0

Street	Address	Page No.	Flush	Hydrant	Notes	2011	2012	2012
						C12 RES	C12 NEW	GAL.
Rose Ln 5.2.12	108	114 & 123	HYD	5007	Use Hydrant	1.9	1.83	150
Talbryn Reg 5.2.12	Regulator	123	REG		Test Zone 5 & Zone 2	2.4	1.86/1.71	1,150/300
Talbryn Ln 5.3.12	8 or 5	123	HYD	2220	Use Hydrant	1.8	1.94	150
Courtland Ct 5.3.12	1630	124			INSTALL 2"	1.5	1.68	150
Vine St 5.3.12	1615	136	HYD	5012	Use Hydrant	1.5	1.46	525
Vine Reg	Regulator	123	REG		BUILD AREA TO FLUSH/TEST ZONES			
Spring St 5.4.12	9 or 14	123			INSTALL 2"	1.9	1.86	0
Oak Tree Ln 5.4.12	17	123	HYD	2207	Use Hydrant	1.6	1.78	150
English Ct 5.4.12	11 or 14	123	HYD	2032	Use Hydrant	1.9	1.85	150
Porspect St 5.4.12	1659	136	HYD	2042	Use Hydrant	2.3	1.88	150
Molitor Rd 5.4.12	1673	136	HYD	2037	Use Hydrant	1.6	1.95	150
Sunnyslope Ave 5.4.12	1629	136	HYD	2028	Use Hydrant	2	1.78	450
King St	1654	136	HYD	2241	Use Hydrant	1.5	TEST	
O'Neill Ave 5.4.12	1200	122	B/O	2016	B/O near alley		2	150
Harbor/ECR 5.4.12	1480	134	HYD	1018	Use Hydrant	1.9	1.98	300
El Camino Real	1538	134	MTR		Meter located on Civic Lane		TEST	
F St 5.4.12	800	145	HYD	1005	Use Hydrant	2.5	2.2	225
Ralston Hall	End	90	HYD	1138	1397 ECR closest service			
Broadway/ECR 5.7.12	1360	133	HYD	1016	Use Hydrant	2.4	2.19	150
Old County Rd 5.7.12	209	144	HYD	1820	??? INSTALL ???	2.3	2.18	750
Old County Rd 5.7.12	221	144	HYD	1821	??? INSTALL ???	1.5	2.14	750
Industrial Rd 5.7.12	405	152	HYD	1837	Use Hydrant	2	2.02	150
Industrial Rd	181	148			??? INSTALL ???		TEST	
Glenn Way 5.7.12	110	151	HYD	1823	Use Hydrant	2.2	2.16	750
Bragato Rd 5.7.12	501	144 & 150	HYD	1826	Use Hydrant	2	2.08	300
Harbor Blvd 5.7.12	125	141	HYD		Use Hydrant	1.7	2.2	525
Dairy Ln 5.7.12	1	98	HYD	1080	Use Hydrant/ tested 1 Dairy Ln		1.9	0
Concourse Dr 5.7.12	End	127	HYD	1145	Located at end of drive	2.2	2.11	600

Street	Address	Page No.	Flush	Hydrant	Notes	2011	2012	2012
						C12 RES	C12 NEW	GAL.
Concourse Dr 5.7.12	End	138	HYD	1150	Use Hydrant	2.4	1.72	225
Newcastle Ln 5.7.12	108 or 109	137	HYD	1162	Use Hydrant	2	2.04	150
Manchester Ln 5.7.12	108 or 109	137	HYD	1163	Use Hydrant	1.7	2.08	150
Frog Valley Ln 5.7.12	105	137	HYD	1913	Use Hydrant	1.5	2.01	150
London Ln 5.7.12	105	137	HYD	1914	Use Hydrant	1.8	2.02	150
Sotocastle Ln 5.7.12	109	126 & 137	HYD	1916	Use Hydrant	2.2	2.03	150
Farallon Dr 5.7.12	104	137		1160	INSTALL AT VALVE 061 - 2" Test 100	2.1	1.95	150
Sem Ln 5.7.12	110	140	HYD	1085	Use Hydrant	2.1	1.81	1,125
Cormorant Dr 5.10.12	HYDRANT	148	HYD	1078	Use Hydrant	1.8	1.96	1,425
Shoreway Rd 5.10.12	INTERTIE	148	INT		Intertie		2.11	1,575
Wessex Way 5.10.12	620	119	HYD	1123	Use Hydrant	2.3	2.2	150
Wessex Way 5.10.12	408	130	HYD	1127	Use Hydrant	2.2	2.18	150
Oxford Ct (N)	17	128	HYD	1923	Use Hydrant	1.6	2.03	150
Seagate Way 5.23.12	501	116	B/O		REBUILD/MOVE 2"		1.92	75
Seagate PI 5.14.12	10	116	MTR			2.1	2.04	0
Biddulph Way 5.14.12	500	118			INSTALL 2"		1.91	0
Marine View Ave 5.14.12	INTERTIE	116	INT		Intertie	2.1	1.72	225
Sussex Ct 5.14.12	313 or 315	107	MTR			2.3	2.1	0
Dale View Ave 5.14.12	496	96	HYD	1094	Use Hydrant	2.1	1.83	150
ECR/North Rd 5.14.12	INTERTIE	85	INT		ECR/North Cal Water Intertie	1.9	1.98	0
North Rd Reg 5.14.12	Regulator	85	REG		BUILD AREA TO FLUSH/TEST ZONES	1.6	2.02	150
North Rd 5.14.12	INTERTIE	85	INT		North Rd Cal Water Intertie	1.5	2.14	150
Anita Ct 5.14.12	9	86	HYD	2153	Use Hydrant	2.1	1.86	150
Anita Ave 5.14.12	929 or 932	86	B/O		2" F.I.P. Blow Off	2.3	2.02	150
Julia Ct 5.14.12	5 or 9	86	B/O		2" F.I.P. Blow Off	2.2	1.88	150
Anita Ave/ECR 5.14.12	240	97	B/O		2" Cam Lock Blow Off		1.45	0
Belmont Ave 5.14.12	803	97	B/O		2" F.I.P. Blow Off - LOW FLOW	2.1	1.73	150
Davey Glen Rd 5.14.12	Regulator	98			BUILD AREA TO FLUSH/TEST ZONES	2	1.95	150

Street	Address	Page No.	Flush	Hydrant	Notes	2011	2012	2012
						C12 RES	C12 NEW	GAL.
Camino Vista Ct 5.14.12	12 or 15	99	MTR		DO NOT USE 16 !!!		2.04	0
Middle Rd 5.14.12	525	109	HYD	2176	Use Hydrant, Central School	2.3	2.06	150
Kingston Rd 5.23.12	620	99			??? INSTALL ???	1.7	1.85	0
Middle Rd/Laurel Ct 5.16.12	655	110	HYD	1004	Use Hydrant	2	1.36	150
Hill St 5.16.12	1041	111	HYD	2040	Use Hydrant	1.9	2.14	150
Southview Ct 5.16.12	620	100	HYD	2182	Use Hydrant	2	2.2	150
Phyllis Ct 5.23.12	14 or 18	100	HYD	2162	Use Hydrant	2	2.17	700
Korbel Way 5.16.12	18 or 22	99 & 100	B/O		MOVE/INSTALL 2"	1.9	2.2	150
Debbie Ln 5.16.12	10 or 14	99	B/O	2166	MOVE/INSTALL 2"	1.8	2.07	150
Willow Ln 5.16.12	28	89	HYD	2159	Use hydrant	1.9	1.87	0
Williams St 5.23.12	1509	88			INSTALL 2"		1.87	0
Ridge Rd	1500	87	HYD	3141	Use Hydrant	2.2	1.74	0
Hillman Ave 5.23.12	1823	73	B/O		2" F.I.P. Blow Off		1.89	75
Mills Ave 5.16.12	1700 or 1701	72	B/O		Hose Threads	2.4	2.19	0
Irene Ct 5.16.12	200	72	B/O		MOVE/INSTALL 2"/ tested 200 Irene ct		2.07	0
Mezes Ave 5.16.12	1800	73 & 61	HYD	3111	Use Hydrant	1.8	1.64	0
Oak Knoll Dr 5.17.12	1915 or 1917	75	HYD	3122	Use Hydrant	1.9	1.81	150
Pine Knoll Dr 5.17.12	1500	89	HYD	3129	Use hydrant	1.8	1.74	150
Bayview Ave 5.17.12	1802	73	MTR			1.6	1.9	0
Shirley Rd 5.17.12	2119	51	HYD	3052	Use hydrant	1.8	1.68	525
Lincoln Intertie 5.23.12	INTERTIE	40	INT		Flush at intertie		1.98	0
Ponce Ave 5.17.12	2820	43	HYD	3213	Use hydrant	2.2	1.93	450
Read Ave 5.23.12	2618	55	HYD	3067	Bring 2 long & 1 short hose		2.2	2,250
San Juan Reg 5.17.12	Regulator	32	REG		BUILD AREA TO FLUSH/TEST ZONES	2.1	z3 1.98/z9 1.74	1,500
Bartlett Way 5.17.12	END	11 & 21	HYD	9015	Use hydrant	1.6	1.74	525
Bartlett Way	3405	11 & 21	HYD	9016	Use hydrant	N/A	N/A	
East Laurel Creek Rd	3130	20	HYD	9014	Use hydrant	N/A	N/A	
East Laurel Creek Rd	3132	20	HYD	9007	Use hydrant	N/A	N/A	

Street	Address	Page No.	Flush	Hydrant	Notes	2011	2012	2012
						C12 RES	C12 NEW	GAL.
Oak Ct 5.17.12	3286	19			INSTALL 2"	1.9	1.9	150
Haskins Reg 5.23.12	Regulator	19	REG		BUILD AREA TO FLUSH/TEST ZONES	2.2	1.94	0
Alhambra Dr 5.17.12	2929	29	HYD	3201	Use hydrant	1.9	1.83	825
Monte Cresta Dr 5.18.12	2941	29	MTR		INSTALL 2"	1.9	1.96	375
Allview Way 5.17.12	2719	30	HYD	3041	Use hydrant	2	1.74	225
Monte Cresta Dr 5.17.12	2824	30	HYD		Use hydrant	1.8	1.95	225
Alhambra Dr 5.17.12	2848	21	HYD	3040	Use hydrant	1.8	1.84	225
Coronet 5.18.12	2600	67			End of Main Zone 3	1.8	1.77	0
Coronet 5.18.12	2590	67			End of Main Zone 2		1.89	0
Kimmie Ct 5.17.12	19	66	HYD	2133	Use hydrant		2.04	150
Arthur 5.18.12	2108	65	B/O		2" F.I.P. Blow Off		2.2	300
Arthur 5.18.12	2102	65			End of Main Zone 2		2.15	0
Alden Ct 5.18.12	1261	77	HYD	2205	Use hydrant		1.91	150
Robbin Whipple 5.18.12	1881	77	HYD	2222	Use hydrant		2.03	150
Folger Ct 5.18.12	15	90	B/O		1" F.I.P. Blow Off		1.79	0
Francis Ct 5.18.12	1751	91	B/O		1.5" F.I.P. Blow Off		2.2	150
Misty Ln 5.18.12	1008	92	MTR				2.12	0
Kittie Ln 5.18.12	27	79 & 93	HYD	2211	Use hydrant		1.93	225
Ralston Ave 5.18.12	1220	113	HYD	2201	Use hydrant		2.1	300
Ralston Ave Reg 5.18.12	Regulator	113	REG		BUILD AREA TO FLUSH/TEST ZONES		z2 2.18	75
Holly Rd 5.18.12	730	111	HYD	2192	Use hydrant		2	150
Kittie Ln	1008	92	MTR				2.12	0
Kittie Ln	27	79 & 93	HYD	2211	Use hydrant		1.93	225
Ralston Ave	1220	113	HYD	2201	Use hydrant		2.1	300
Ralston Ave Reg	Regulator	113	REG		BUILD AREA TO FLUSH/TEST ZONES		z2 2.18	75

THIS COLOR REPRESENTS CL2 LEVELS TO BE CHECKED QUARTERLY

THIS COLOR REPRESENTS AREAS TO HAVE BLOW OFFS INSTALLED OR REPAIRED

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 2941 MONTE CRESTA DR

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other WEeping VALVE ROuNET

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 6/30/11

DURATION OF DISCHARGE (Military Time): START: 1100 AM END: 0800 AM

ESTIMATED VOLUME: 1800 Gallons ESTIMATED FLOW RATE: 360 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 1100 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 1100 hrs Responding Crew Arrival Time: 0800 hrs

Rick Bisio
STAFF (Please Print)

DATE: 7/5/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 1546 NOTRE DAME

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 7/15/11

DURATION OF DISCHARGE (Military Time): START: 0300 END: 0830

ESTIMATED VOLUME: 35,000 Gallons ESTIMATED FLOW RATE: 35,000 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0300 hrs Regulatory Agency Notification Time²: NA hrs

Operator/Inspector Arrival Time: 0330 hrs Responding Crew Arrival Time: 0800 hrs

Rick Bisio
STAFF (Please Print)

DATE: 7/15/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 1200 North Dame

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 7/23/11

DURATION OF DISCHARGE (Military Time): START: 0200 END: 0430

ESTIMATED VOLUME: 23,000 Gallons ESTIMATED FLOW RATE: 23,000 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0200 hrs Regulatory Agency Notification Time²: NA hrs

Operator/Inspector Arrival Time: 0230 hrs Responding Crew Arrival Time: 0300 hrs

Rick Bisio
STAFF (Please Print) DATE: 7/23/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 1515 A FOLGER

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 8/25/11

DURATION OF DISCHARGE (Military Time): START: 1000 END: 1600

ESTIMATED VOLUME: 3500 Gallons ESTIMATED FLOW RATE: 3,500 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____ _____ _____	

Time of Discharge Discovery: 1000 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 1000 hrs Responding Crew Arrival Time: 1030 hrs

Rick Bisio
STAFF (Please Print)

DATE: 8/25/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 2024 AERRR

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 8/28/11

DURATION OF DISCHARGE (Military Time): START: 0900 END: 1100

ESTIMATED VOLUME: 19000 Gallons ESTIMATED FLOW RATE: 19000 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0900 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0900 hrs Responding Crew Arrival Time: 1000 hrs

Rick Bisio
STAFF (Please Print)

DATE: 8/28/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 300 El Camino

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 8 / 31 / 11

DURATION OF DISCHARGE (Military Time): START: 1530 END: 2030

ESTIMATED VOLUME: 48,500 Gallons ESTIMATED FLOW RATE: 48,500 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3.*DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____ _____ _____	

Time of Discharge Discovery: 1530 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 1545 hrs Responding Crew Arrival Time: 1600 hrs

Rick Bisio
STAFF (Please Print)

DATE: 8 / 31 / 11

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 2024 AEROR AVE

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 9/29/11

DURATION OF DISCHARGE (Military Time): START: @ 1330 END: 1430

ESTIMATED VOLUME: 25,000 Gallons ESTIMATED FLOW RATE: 25,000 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: @ 1330 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: @ 1400 hrs Responding Crew Arrival Time: 1430 hrs

Rick Bisio
STAFF (Please Print)

DATE: 9/30/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 3202 JOPER LANE

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 10/19/11

DURATION OF DISCHARGE (Military Time): START: 0740 END: 1100

ESTIMATED VOLUME: 8,500 Gallons ESTIMATED FLOW RATE: 8,500 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: <u>0</u> mg/L	0.05mg/L or less
2 *pH: <u>NA</u> Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: <u>12 / CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>NA</u> NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLORINATE WATER WITH DECHLOR TABS, COVERED DRAIN INLET WITH FABRIC</u>	

Time of Discharge Discovery: 0740 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0800 hrs Responding Crew Arrival Time: 0810 hrs

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 10/19/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 3013 San Juan

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 12/10/11

DURATION OF DISCHARGE (Military Time): START: 0830 END: 1030

ESTIMATED VOLUME: 4200 Gallons ESTIMATED FLOW RATE: 4200 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0830 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0845 hrs Responding Crew Arrival Time: 0900 hrs

Ricce Bisio
STAFF (Please Print)

DATE: 12/10/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 239 Shelton

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other Wrecking Valve Bonnet

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 12/26/11

DURATION OF DISCHARGE (Military Time): START: 1400 END: 1000

ESTIMATED VOLUME: 15,000 Gallons ESTIMATED FLOW RATE: 15,000 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: <u>0</u> mg/L	0.05mg/L or less
2 *pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: <u>VERY CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>N/A</u> NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>USED DECHLORINATE TABLETS TO DECHLORINATE CLEAR WATER, COVERED DRAIN INLETS.</u>	

Time of Discharge Discovery: 1400 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 1420 hrs Responding Crew Arrival Time: 0800 hrs

Ricardo Bisio
STAFF (Please Print)

DATE: 12/27/11

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 19 TIoga Way

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 1/15/12

DURATION OF DISCHARGE (Military Time): START: 0100 END: 0330

ESTIMATED VOLUME: 21,000 Gallons ESTIMATED FLOW RATE: 21,000 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0100 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0130 hrs Responding Crew Arrival Time: 0200 hrs

Ricardo Bisio
STAFF (Please Print)

DATE: 1/15/12

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 3203 Upper Loma

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 1/17/12

DURATION OF DISCHARGE (Military Time): START: 1300 END: 1430

ESTIMATED VOLUME: 6,500 Gallons ESTIMATED FLOW RATE: 6,500 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	
<u>BAGGED D.T. USES DECHLOR TABLETS TO DECHLORINATE WATER</u>	

Time of Discharge Discovery: 1300 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 1300 hrs Responding Crew Arrival Time: 1330 hrs

Ricardo Bisio
STAFF (Please Print)

DATE: 1/17/12

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 100 KAREL RD

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 1/18/12

DURATION OF DISCHARGE (Military Time): START: 0730 END: 1000

ESTIMATED VOLUME: 28,500 Gallons ESTIMATED FLOW RATE: 28,500 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0730 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0730 hrs Responding Crew Arrival Time: 0800 hrs

Rox Bisio
STAFF (Please Print)

DATE: 1/18/12

¹ Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
² Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 1100 CHULA VISTA

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other SERVICE LINE

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 1 / 20 / 12

DURATION OF DISCHARGE (Military Time): START: 0100 END: 0400

ESTIMATED VOLUME: 8250 Gallons ESTIMATED FLOW RATE: 8250 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3.*DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0100 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0130 hrs Responding Crew Arrival Time: 0600 hrs

Rick Basio
STAFF (Please Print)

DATE: 1 / 20 / 12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 1233 North

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other weeping pipe hole

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 1/23/12

DURATION OF DISCHARGE (Military Time): START: 1830 END: 0900

ESTIMATED VOLUME: 1200 Gallons ESTIMATED FLOW RATE: 1200 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 1830 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 1845 hrs Responding Crew Arrival Time: 0900 hrs

Rene Biso
STAFF (Please Print)

DATE: 1/23/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 1609 Notre Dame

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 1/27/12

DURATION OF DISCHARGE (Military Time): START: 0630 END: 1100

ESTIMATED VOLUME: 9500 Gallons ESTIMATED FLOW RATE: 9500 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3.*DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____ _____ _____	

Time of Discharge Discovery: 0630 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0645 hrs Responding Crew Arrival Time: 0800 hrs

Rick Biss
STAFF (Please Print)

DATE: 1/27/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities
Potable Water System

SITE/LOCATION: 309 Sussex

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other WATER VALVE

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 2/3/12

DURATION OF DISCHARGE (Military Time): START: 1300 END: 1000 2/7/12

ESTIMATED VOLUME: 3500 Gallons ESTIMATED FLOW RATE: 1000 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05mg/L or less
2 *pH: <u>7.8</u> Standard Units	Between 6.5 – 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABS, FABRIC NET</u> <u>STOPPED</u>	

Time of Discharge Discovery: 1300 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 1300 hrs Responding Crew Arrival Time: 0800 hrs

Rick Bisio
STAFF (Please Print)

DATE: 2/7/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: IN FRONT OF 801 MIRAMAR TERRACE

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 3 / 16 / 2012

DURATION OF DISCHARGE (Military Time): START: 10:50 AM END: 11:00 AM

ESTIMATED VOLUME¹: 750 GALLONS

ESTIMATED FLOW RATE: 750 GALLONS/DAY

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>7.1</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>0.08</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>BAGGED DRAIN INLET AND USED FABRIC OVER THE GRATE. USED DECHLOR TABLETS TO DECHLORINATE THE WATER</u>	

MICHAEL ANDERSON
STAFF (Please Print)

DATE: 3 / 16 / 2012

¹ DWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 28 Willow Lane

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 3/19/12

DURATION OF DISCHARGE (Military Time): START: 0900 END: 1900

ESTIMATED VOLUME: 18,500 Gallons ESTIMATED FLOW RATE: 18,500 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____ _____ _____	

Time of Discharge Discovery: 0900 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0920 hrs Responding Crew Arrival Time: 1000 hrs

Rick Basco
STAFF (Please Print)

DATE: 3/19/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 100 Clipper Drive

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 3/25/12

DURATION OF DISCHARGE (Military Time): START: 0230 END: 0300

ESTIMATED VOLUME: 35,000 Gallons ESTIMATED FLOW RATE: 35,000 Gallons/Day

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3.*DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0230 hrs Regulatory Agency Notification Time²: N/A hrs

Operator/Inspector Arrival Time: 0250 hrs Responding Crew Arrival Time: N/A hrs

Rick Bisio
STAFF (Please Print)

DATE: 3/25/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: 100 CLIPPER DRIVE

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other Blow off hydrant

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 3/26/12

DURATION OF DISCHARGE (Military Time): START: 1000 END: 1005

ESTIMATED VOLUME¹: 500 GALLONS

ESTIMATED FLOW RATE: 500 GALLONS/DAY

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>7.2</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>0.05</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u> </u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>USED DECHLOR TABLETS TO DECHLORINATE WATER, FABRIC AND SANDRAG STORM DRAIN.</u>	

Ricardo Bisio
STAFF (Please Print)

DATE: 3/26/12

¹ DWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 1600 BELBURN

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 4 14 12

DURATION OF DISCHARGE (Military Time): START: 2330 END: 0230

ESTIMATED VOLUME: 48,600 Gallons ESTIMATED FLOW RATE: 48,600 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3.*DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 2330 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0000hrs Responding Crew Arrival Time: 0030 hrs

River Bisio
STAFF (Please Print)

DATE: 4 15 12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is >50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / ALL OVER BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 4 / 24 / 12

DURATION OF DISCHARGE (Military Time): START: 11:30 AM END: 3:30 PM

ESTIMATED VOLUME¹: 2,550 TOTAL GALLONS

ESTIMATED FLOW RATE: 15,300 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1. *CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2. *pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 4 / 24 / 12

¹ DWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 4 / 25 / 12

DURATION OF DISCHARGE (Military Time): START: 11:30 AM END: 3:30 PM

ESTIMATED VOLUME¹: 1,350 TOTAL GALLONS

ESTIMATED FLOW RATE: 8,100 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA -- REQUIRED*</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2. *pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 4 / 25 / 12

¹ DWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other TESTING CHLORINE

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 4 126 12

DURATION OF DISCHARGE (Military Time): START: 1:00 PM END: 3:30 PM

ESTIMATED VOLUME¹: 125 TOTAL GALLONS

ESTIMATED FLOW RATE: 9,000 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1. *CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2. *pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 4 126 12

¹ DWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / DEED ENDS BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other TESTING, CHLORINE

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 4 / 27 / 12

DURATION OF DISCHARGE (Military Time): START: 8:00 AM END: 4:00 PM

ESTIMATED VOLUME¹: 3,525 TOTAL GALLONS

ESTIMATED FLOW RATE: 10,575 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

Jonathan Anderson
STAFF (Please Print)

DATE: 4 / 27 / 12

¹ DWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING DEAD END MAINS / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 4 / 30 / 12

DURATION OF DISCHARGE (Military Time): START: 1:30 PM END: 3:30 PM

ESTIMATED VOLUME¹: 40 TOTAL GALLONS

ESTIMATED FLOW RATE: 480 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON

STAFF (Please Print)

DATE: 4 / 30 / 12

¹ DWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / DEAD END FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 1 / 12

DURATION OF DISCHARGE (Military Time): START: 1:30 PM END: 4:30 PM

ESTIMATED VOLUME¹: 675 GALLONS

ESTIMATED FLOW RATE: 5400 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 / 1 / 12

¹ DWWRR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / DEAD END FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 2 / 12

DURATION OF DISCHARGE (Military Time): START: 2:00 PM END: 4:00 PM

ESTIMATED VOLUME¹: 1,600 TOTAL GALLONS

ESTIMATED FLOW RATE: 19,200 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 / 2 / 12

¹ DWWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 11605 Cleve St

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5/3/12

DURATION OF DISCHARGE (Military Time): START: 1300 END: 1000

ESTIMATED VOLUME: 4500 Gallons ESTIMATED FLOW RATE: 1,125 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3. *DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: _____ hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: _____ hrs Responding Crew Arrival Time: _____ hrs

Rick Bisio
STAFF (Please Print)

DATE: 5/17/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / DEAD END FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 13 12

DURATION OF DISCHARGE (Military Time): START: 2:00 PM END: 4:00 PM

ESTIMATED VOLUME¹: 825 TOTAL GALLONS

ESTIMATED FLOW RATE: 9,900 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON

STAFF (Please Print)

DATE: 5 13 12

¹ DWWP shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / DEAD END FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 14 / 12

DURATION OF DISCHARGE (Military Time): START: 12:00 PM END: 4:00 PM

ESTIMATED VOLUME¹: 1,725 TOTAL GALLONS

ESTIMATED FLOW RATE: 10,350 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR. TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 / 14 / 12

¹ DWWRR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 7 / 12

DURATION OF DISCHARGE (Military Time): START: 8:00 AM END: 4:30 PM

ESTIMATED VOLUME¹: 6,225 TOTAL GALLONS

ESTIMATED FLOW RATE: 18,675 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

Jonathan Anderson
STAFF (Please Print)

DATE: 5 / 7 / 12

¹ DWWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 10 / 12

DURATION OF DISCHARGE (Military Time): START: 1:00 PM END: 4:00 PM

ESTIMATED VOLUME¹: 3450 TOTAL GALLONS

ESTIMATED FLOW RATE: 27,600 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 / 10 / 12

¹ DWWP shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / DELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 14 / 12

DURATION OF DISCHARGE (Military Time): START: 8:00 AM END: 4:00 PM

ESTIMATED VOLUME¹: 1,575 TOTAL GALLONS

ESTIMATED FLOW RATE: 4,725 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

Jonathan Anderson
STAFF (Please Print)

DATE: 5 / 14 / 12

¹ DWWP shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 16 / 12

DURATION OF DISCHARGE (Military Time): START: 12:00 PM END: 4:00 PM

ESTIMATED VOLUME¹: 750 TOTAL GALLONS

ESTIMATED FLOW RATE: 4,500 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 / 16 / 12

¹ DWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 17 / 12

DURATION OF DISCHARGE (Military Time): START: 8:00AM END: 4:00 PM

ESTIMATED VOLUME¹: 5,100 TOTAL GALLONS

ESTIMATED FLOW RATE: 15,300 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECLORINATE TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 / 17 / 12

¹ DWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING / FLUSHING / BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 / 18 / 12

DURATION OF DISCHARGE (Military Time): START: 8:00 AM END: 4:00 PM

ESTIMATED VOLUME¹: 2,025 TOTAL GALLONS

ESTIMATED FLOW RATE: 6,075 GALLONS/DAY

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1. *CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2. *pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3. *DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5. *IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 / 18 / 12

¹ DWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: CHLORINE TESTING/FLUSHING/BELMONT

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other CHLORINE TESTING

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5 123 112

DURATION OF DISCHARGE (Military Time): START: 8:00 AM END: 4:00 PM

ESTIMATED VOLUME¹: 3,100 TOTAL GALLONS

ESTIMATED FLOW RATE: 9,300 GALLONS/DAY

*REQUIRED BEST MANAGEMENT PRACTICES (BMPs): Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

MONITORING DATA – REQUIRED	BENCHMARKS
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>N/A</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>DECHLOR TABLETS</u>	

JONATHAN ANDERSON
STAFF (Please Print)

DATE: 5 123 112

¹ DWWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 1011 Muir Way

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 5/29/12

DURATION OF DISCHARGE (Military Time): START: 0800 END: 1000

ESTIMATED VOLUME: 1200 Gallons ESTIMATED FLOW RATE: 1200 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: _____ mg/L	0.05mg/L or less
2 *pH: _____ Standard Units	Between 6.5 – 8.5
3.*DISCHARGE TURBIDITY: _____ NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: _____ NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: _____	

Time of Discharge Discovery: 0800 hrs Regulatory Agency Notification Time²: _____ hrs

Operator/Inspector Arrival Time: 0820 hrs Responding Crew Arrival Time: 0900 hrs

Rick Basio
STAFF (Please Print)

DATE: 5/29/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

UNPLANNED DISCHARGES

Accidents, Incidents & Non-Routine Activities Potable Water System

SITE/LOCATION: 2552 Sherbourne

DISCHARGE TYPE: Line Break Leak Overflow Fire Hydrant Shearing
 Emergency Flushing Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 6/12/12

DURATION OF DISCHARGE (Military Time): START: 0800 END: 1045

ESTIMATED VOLUME: 2,500 Gallons ESTIMATED FLOW RATE: 2,500 Gallons/Day

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment control upon containing the discharge and attaining safety of the discharge site.

<u>*MONITORING DATA¹</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05mg/L or less
2 *pH: <u>8.1</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>0.5</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>0.5</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>FABRIC AND STORM DRAIN</u> <u>DECHLOR TABLETS</u>	

Time of Discharge Discovery: 0800 hrs Regulatory Agency Notification Time²: N/A hrs

Operator/Inspector Arrival Time: 0815 hrs Responding Crew Arrival Time: 0900 hrs

Rick Bisio
STAFF (Please Print)

DATE: 6/14/12

Monitoring data is only required for 10% of the unplanned discharges. If you monitored more than 10%, report all of the data.
2. Notification to Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 is required for unplanned discharges where the chlorine residual is >0.05 mg/L and total volume is ≥50,000 gallons (no later than 24 hrs). Notification to State Office of Emergency Services is required after becoming aware of aquatic impacts (fish kill) as a result of unplanned discharge or when the discharge might endanger or compromise public health and safety. Please reference the MRP for permit requirements.

PLANNED DISCHARGES

Routine Operation & Maintenance Activities Potable Water System

SITE/LOCATION: 522 WESSEX

DISCHARGE TYPE: Main Disinfection Hydrant Testing/Flows Storage Tank Maintenance
 Reservoir Dewatering Water Main Dewatering Distribution Main Flushing
 Cleaning & Lining Pipe Sections Other _____

RECEIVING WATER: Pacific Ocean San Francisco Bay

DATE OF DISCHARGE: 06/28/12

DURATION OF DISCHARGE (Military Time): START: 1300 END: 1315

ESTIMATED VOLUME¹: 2244 GALLONS

ESTIMATED FLOW RATE: 2,244 GALLONS/DAY

***REQUIRED BEST MANAGEMENT PRACTICES (BMPs):** Shall implement appropriate BMPs for dechlorination and erosion and sediment controls for all planned discharges.

<u>*MONITORING DATA – REQUIRED*</u>	<u>BENCHMARKS</u>
1.*CHLORINE RESIDUAL: <u>0</u> mg/L	0.05 mg/L or less
2.*pH: <u>7.9</u> Standard Units	Between 6.5 - 8.5
3.*DISCHARGE TURBIDITY: <u>CLEAR WATER</u> NTU	50 NTU or less post BMPs
4. RECEIVING WATER TURBIDITY: <u>CLEAR WATER</u> NTU	Only when feasible at point of discharge
5.*IMPLEMENTED BMPs & CORRECTIVE ACTIONS: <u>FABRIC OVER STORM DRAIN</u> <u>DECHLOR TABLETS USED TO DECHLORINATE WATER</u>	

Rick Bisio
STAFF (Please Print)

DATE: 06/28/12

¹ DWR shall notify Water Board staff at info2@waterboards.ca.gov or (510) 622-2300 at least 1 week in advance with a total volume of 500,000 gallons or more or a flow rate of 250,000 gallons per day or more. Please reference the MRP for permit requirements.

SITE LOCATION	PLANNED OR UNPLANNED	DISCHARGE TYPE	RECEIVING WATER	DATE	START TIME	END TIME	EST. VOLUME	EST. DAILY FLOW RATE	*1 RES	*2 PH	*3 TURBIDITY	R-W TUBIDITY	*5 BMP'S
EXBOURNE TANK #1	PLANNED	TANK MAINT.	SF BAY	10/8/10	0900	1530	38,360	141,637	0mg/L	8.4	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
HERSOM TANK/LYON AVE	PLANNED	TANK MAINT.	SF BAY	10/8/10	1000	1600	26,300	105,200	0mg/L	7.8	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
HERSOM TANK	PLANNED	TANK MAINT.	SF BAY	10/12/10	1000	1600	26,300	105,200	0mg/L	7.2	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
EXBOURNE TANK	PLANNED	TANK MAINT.	SF BAY	10/12/10	0830	1530	25,000	85,714	0mg/L	6.8	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
HERSOM TANK	PLANNED	TANK MAINT.	SF BAY	10/13/10	0830	1600	22,500	72,000	0mg/L	7.8	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
HERSOM TANK	PLANNED	TANK MAINT.	SF BAY	10/14/10	0830	0825	18,800	18,800	0mg/L	7.2	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
EAST LAUREL CREEK	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	11/9/10	1100	1400	25,000	200,000	0mg/L	7.8	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
DEKOVEN TANK #1	PLANNED	TANK MAINT.	SF BAY	12/17/10	0930	1530	22,000	88,000	0mg/L	6.2	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
DEKOVEN TANK #1	PLANNED	TANK MAINT.	SF BAY	12/20/10	0830	1530	14,700	50,400	0mg/L	6.2	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
DEKOVEN TANK #1	PLANNED	TANK MAINT.	SF BAY	12/21/10	0900	1500	7,400	29,600	0mg/L	6.2	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
DEKOVEN TANK #2	PLANNED	TANK MAINT.	SF BAY	1/27/11	0900	1600	30,500	104,571	0mg/L	8	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
DEKOVEN TANK #2	PLANNED	TANK MAINT.	SF BAY	1/28/11	0900	1500	15,500	62,000	0mg/L	8	<1.0	N/A	Dechlor Tabs/Filter Fabric @ DI
2820 PONCE	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/1/11	1300	1310	175	25,200	0 mg/L	7	12	N/A	Dechlor Tabs/Filter Fabric @ DI
2719 ALL VIEW WAY	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/1/11	1400	1410	175	25,200	0 mg/L	6.9	28	N/A	Dechlor Tabs/Filter Fabric @ DI
20 DAVIS DR	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/1/11	1440	1500	350	25,200	0 mg/L	7	18	N/A	Dechlor Tabs/Filter Fabric @ DI
496 DALE VIEW	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/3/11	0840	0845	87	25,056	0 mg/L	7	18	N/A	Dechlor Tabs/Filter Fabric @ DI
620 SOUTHVIEW CT.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/3/11	1050	1055	87	25,056	0 mg/L	6.8	12	N/A	Dechlor Tabs/Filter Fabric @ DI
MARINE VIEW AVE	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/3/11	1125	1145	350	25,200	0 mg/L	7.2	30	N/A	Dechlor Tabs/Filter Fabric @ DI
MIDDLE RD./LAUREL CT.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/3/11	1250	1310	350	25,200	0 mg/L	6.9	10	N/A	Dechlor Tabs/Filter Fabric @ DI
TALBRYN INTERTIE.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/3/11	1330	1400	525	25,200	0 mg/L	7	28	N/A	Dechlor Tabs/Filter Fabric @ DI
4225 SKYMONT DR.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	0850	0900	175	175	0 mg/L	6.8	12	N/A	Dechlor Tabs/Filter Fabric @ DI
3 DIONNE CT.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	0925	0935	175	25,200	0 mg/L	7	14	N/A	Dechlor Tabs/Filter Fabric @ DI
6 SKYMONT CT.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	0950	0955	87	25,200	0 mg/L	6.9	10	N/A	Dechlor Tabs/Filter Fabric @ DI
37 HERITAGE CT.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	1025	1030	87	25,056	0 mg/L	6.8	10	N/A	Dechlor Tabs/Filter Fabric @ DI
48 MEADOW PARK CIRCLE	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	1030	1035	87	25,056	0 mg/L	6.7	8	N/A	Dechlor Tabs/Filter Fabric @ DI
22 RINCONADA CIRCLE.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	1045	1050	87	25,056	0 mg/L	6.8	12	N/A	Dechlor Tabs/Filter Fabric @ DI
929 ANITA AVE	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	1100	1120	175	25,056	0 mg/L	6.9	22	N/A	Dechlor Tabs/Filter Fabric @ DI
5 JULIA CT.	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	1130	1150	350	25,200	0 mg/L	6.8	14	N/A	Dechlor Tabs/Filter Fabric @ DI
ANITA AVE/EL CAMINO REAL	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	1245	1250	87	25,200	0 mg/L	6.8	12	N/A	Dechlor Tabs/Filter Fabric @ DI
BELMONT AVE/EL CAMINO	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	3/7/11	1300	1430	1,575	25,056	0 mg/L	6.7	24	N/A	Dechlor Tabs/Filter Fabric @ DI
PULLMAN EWELL	UNPLANNED	LEAK	SF BAY	2/20/11	0900	0430	375	25,200	0 mg/L	7.8	12.5	N/A	Dechlor Tabs/Filter Fabric @ DI
SIXTH & WALTERMIRE	UNPLANNED	LEAK	SF BAY	3/17/11	0900	1000	18.75	450	0.03	8	12.5	N/A	Dechlor Tabs/Filter Fabric @ DI
SIXTH AND BROADWAY	UNPLANNED	LEAK	SF BAY	2/23/11	0800	1200	8	48	0 mg/L	7.5	<1.0	NA	Dechlor Tabs/Filter Fabric @ DI
3600 EAST LAUREL CREEK	PLANNED	DISTRIBUTION MAIN FLUSHING	SF BAY	2/15/11	1430	1500	1000	48,000	0 mg/L	7.5	1.6	N/A	Dechlor Tabs/Filter Fabric @ DI
TIOGA WAY	UNPLANNED	LINE BREAK	SF BAY	2/27/11	0930	1530	3740	14,960	0 mg/L	7.5	2.5	N/A	Dechlor Tabs/Filter Fabric @ DI
CARLMONT DR	UNPLANNED	FIRE HYDRANT SHEARING	SF BAY	5/4/11	1535	1610	45000	1,080,000	0.05 mg/L	7.8	<1.0	N/A	N/A
PULLMAN/EWELL	UNPLANNED	LEAK	SF BAY	10/20/10	0800	0815	50	4,800	0.05 mg/L	8	12	N/A	Dechlor Tabs/Filter Fabric @ DI
901 AVON	UNPLANNED	LEAK	SF BAY	3/29/11	0800	1100	350	2,800	0 mg/L	7.5	2.5	N/A	Dechlor Tabs/Filter Fabric @ DI
BARTLETT	UNPLANNED	LEAK	SF BAY	3/24/11	1120	1208	12300	369,000	0 mg/L	8	<1.0	N/A	N/A
3023 SANJUAN	UNPLANNED	LEAK	SF BAY	1/10/11	1500	2000	10000	48,000	0 mg/L	7.5	12	N/A	Dechlor Tabs/Filter Fabric @ DI