

Attachment 1

California Regional Water Quality Control Board North Coast Region

Compliance Self-Evaluation Form for Monitoring and Reporting Program No. R1-2002-0105

Issued to
Scotia Pacific Company, LLC
and Pacific Lumber Company

Regarding Winter Activities
Within the Elk River Watershed

This form fulfills Item IV.C. in the MRP, and documents compliance with provisions of Board Order Number R1-2002-0105 and the Report of Waste Discharge submitted by the Pacific Lumber Company for winter activities in the Elk River watershed.

REPORTING PERIOD (check a season and fill in year):

- ☐ Spring _____
☐ Summer _____
☐ Fall _____
☐ Winter _____

WASTE DISCHARGE REQUIREMENT PROVISIONS:

A. Copies of Order

Are copies of Board Order Number R1-2002-## maintained and appropriate business office(s) and field location(s) so as to be readily available for reference by any personnel at all times?

YES ☐ NO ☐

If YES, please specify locations where copies are maintained. If NO, please indicate reason for noncompliance and indicate date when compliance will be achieved.

C. Operation and Maintenance

Are all facilities, treatment systems, erosion control systems, and related appurtenances that allow for management of controllable waste discharges to the Elk River and its tributaries maintained in good working condition and operated as efficiently as possible?

YES ☐ NO ☐

If NO, please indicate reason(s) and proposed date to achieve compliance.

D. Unplanned Change in Discharge

Have there been any unplanned changes in discharge over the reporting period (e.g., spills, landslides, etc.)?

YES ☐ NO ☐

If YES, please indicate nature of unplanned change(s) in discharge, date of occurrence, and date(s) of Regional Water Board notification.

J. Noncompliance

1. Have there been any events which have caused an inability to comply with the conditions of Board Order Number R1-2002-xx?

YES ☐ NO ☐

If YES, please indicated nature(s) of and reason(s) for noncompliance, date(s) of occurrence, and date(s) of Regional Water Board notification.

2. Have there been any instances in which II. Discharge Specification B-2 has been exceeded during the installation of a necessary pollution control facility such as a bridge, culvert, energy dissipation device, or erosion control device?

YES ☐ NO ☐

If YES, please list location(s), reason(s), and duration(s), below.

M. Herbicide or Pesticide Use Notification

Have herbicides or pesticides been used on the lands covered by Board Order Number R1-2002-xx during the reporting period (for any portion of the period between October 15 and May 1?

YES ☐ NO ☐

If YES, please list type(s) used, date(s) used, location(s) applied, and date(s) of Regional Water Board notification.

N. Other Applicable Laws and Regulations

Have violation notices, orders, letters, etc. been issued by any governmental agency for activities conducted on the lands covered by Board Order Number R1-2002-xx during the reporting period?

YES ☐ NO ☐

If YES, please list agency(ies), type(s) of notification(s), and date(s) of notification(s) below and attach copies of any written notification(s).

O. Non-Sediment Wastes

Have any types of pollutants other than sediment been identified that may be discharged to receiving waters?

YES ☐ NO ☐

If YES, please list type(s) of pollutants, date(s) identified, and date(s) of Regional Water Board notification(s).

P. Emergency Discharges

Have there been any discharges or flows from health and safety emergencies over the reporting period?

YES ☐ NO ☐

If YES, please list date(s) of discharge(s), nature(s) of discharge(s), and date(s) of Regional Water Board notification(s).

Q. Activity Commencement and Conclusion Notifications

Have startup and conclusion notifications been provided to Regional Water Board staff for all activities in individual THP units during the reporting period?

YES ☐ NO ☐

If NO, please list instances (date(s), THP number(s), unit number(s)) and date(s) of Regional Water Board notification(s).

R. Training/Education for Staff and Contractors

1. Are all personnel and contractors whose decisions or activities could affect storm water quality familiar with the contents of Board Order Number R1-2002-0105.

YES ☐ NO ☐

If NO, please indicate reason(s) and proposed date by which compliance will be achieved.

1. Is there a training program in place for employees whose activities may affect storm water discharges or who are responsible for inspecting/ monitoring discharges?

YES ☐ NO ☐

If NO, please indicate reason(s) and proposed date by which compliance will be achieved.

2. Is there a training program in place for contractors to raise their awareness of the problems and causes of stormwater pollution?

YES ☐ NO ☐

If NO, please indicate reason(s) and proposed date by which compliance will be achieved.

REPORT OF WASTE DISCHARGE INSPECTION PROGRAM

1. Areas of bare soil 1,000 square feet or larger, or where a potential sediment discharge will occur.

Have any such areas been identified during the reporting period?

YES ☐ NO ☐

If YES, please indicate location(s), date(s) identified, remedial action(s) taken, and current status (alternatively, indicate site number or other identifier below and attach a copy of pertinent log sheet(s) or form(s).

2. Sensitive Segments

Have any "sensitive segments" been identified during the reporting period?

YES ☐ NO ☐

If YES, please indicate location(s), date(s) identified, remedial action(s) taken, and current status (alternatively, indicate site number or other identifier below and attach a copy of pertinent log sheet(s) or form(s).

3. Drainage Facilities that could Potentially Discharge Sediment to Receiving Waters?

Have any such areas been identified during the reporting period?

YES ☐ NO ☐

If YES, please indicate location(s), date(s) identified, remedial action(s) taken, and current status (alternatively, indicate site number or other identifier below and attach a copy of pertinent log sheet(s) or form(s).

4. Erosion or Sediment Control Devices

Have any such devices been installed during the reporting period?

YES ☐ NO ☐

If YES, please indicate location(s), type(s) of devices installed, date(s) installed, and current status (alternatively, indicate site number or other identifier below and attach a copy of pertinent log sheet(s) or form(s).

5. Areas Where Site Conditions Suggest Actions Necessary to Prevent Degradation of Water Quality

Have any such areas been identified during the reporting period?

YES ☐ NO ☐

If YES, please indicate location(s), date(s) identified, remedial action(s) taken, and current status (alternatively, indicate site number or other identifier below and attach a copy of pertinent log sheet(s) or form(s).

“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 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.”

SIGNED: _____

TITLE: _____

DATE: _____