

[INSERT Company name and address. letterhead with this information is acceptable]

**NOTE: This example form includes the minimum data and information reporting requirements. Other forms may be used as long as these minimum fields are included.**

## CONSTRUCTION SITE STORMWATER MANAGEMENT REVIEW REPORT

**DATE:** \_\_\_\_\_

**ARRIVAL TIME:** \_\_\_\_\_

**DATE OF LAST REVIEW:** \_\_\_\_\_

**DEPARTURE TIME:** \_\_\_\_\_

**INSPECTION TYPE:**     Regular/Weekly  
                                   Regular/Periodic  
                                   Complaint  
                                   Other \_\_\_\_\_

**PROJECT/SITE** \_\_\_\_\_

**LOCATION** \_\_\_\_\_

**NOI#** \_\_\_\_\_ (<https://enoi.dnrec.delaware.gov/>)

Plan Expiration Date: \_\_\_\_\_

**Approval Agency** \_\_\_\_\_

**OWNER / DEVELOPER** \_\_\_\_\_

New Owner?    Yes     No    (if yes, contact approval agency)

**Project Site Representative on site** \_\_\_\_\_

**WEATHER CONDITIONS** \_\_\_\_\_

**SITE STATUS**             Active         Inactive         Completed

**SITE COMPLIANCE**     Compliant                     Non-Compliant

1) Do conditions exist that prevent performance of an inspection currently?

Yes     No    If yes, explain

\_\_\_\_\_

- 2) Are plans, inspection logs, NOI signage, and contractor certifications on-site/available for review?  
 Yes    No
  
- 3) Have temporary stabilization practices been implemented and maintained?  
 Yes    No
  
- 4) Review the following **checklist** for correct installation, function, and maintenance and indicate if  
                   [N/A] Not Applicable    [S] Satisfactory    [U] Unsatisfactory

**It is best to document existing conditions with photographs of site / BMPs. If Unsatisfactory, include descriptive comments that clearly convey conditions observed.**

- 1. Stabilized Construction Entrance                    \_\_\_\_\_
- 2. Earth Berms / Dikes / Swales                        \_\_\_\_\_
- 3. Inlet Protection    \_\_\_\_\_
- 4. Vegetated Stabilization                                \_\_\_\_\_
- 5. Stormwater Management Pont                        \_\_\_\_\_
- 6. Silt Fence    \_\_\_\_\_
- 7. Sediment Trap(s) / Basins                            \_\_\_\_\_
- 8. Outlet Protection                                         \_\_\_\_\_
- 9. Stone Check Dams                                        \_\_\_\_\_
- 10. Pollution Prevention                                    \_\_\_\_\_
- 11. Soil Stock Piles    \_\_\_\_\_
- 12. Other \_\_\_\_\_
- 13. Other \_\_\_\_\_

**DETAILED COMMENTS / OBSERVATIONS OF CONDITIONS/DEFICIENCIES**

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Actions to be Taken:    Continue Routine Site Reviews    Correct Noted Deficiency(ies)    Other

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Completion Due Date \_\_\_\_\_

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Completion Due Date \_\_\_\_\_

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Completion Due Date \_\_\_\_\_

\_\_\_\_\_

Completion Due Date \_\_\_\_\_

5) Has the site been permanently stabilized?  Yes  No

**Report Completion Date** \_\_\_\_\_

**Site review participants** (if any other than CCR) \_\_\_\_\_

\_\_\_\_\_

**Certified Construction Reviewer (signature)** \_\_\_\_\_

**Certified Construction Review (printed name)** \_\_\_\_\_

**CCR #** \_\_\_\_\_

**Delaware Licensed P.E. (signature)** \_\_\_\_\_

**Delaware Licensed P.E. (printed name)** \_\_\_\_\_

**Delaware Licensed P.E. #** \_\_\_\_\_

**Report Distribution** [include your procedure for distributing completed reports to necessary parties and the list of the report recipients]

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**Approval Agency Manager /Inspector (Signature)** \_\_\_\_\_

Approval Agency Manager /Inspector (Printed Name) \_\_\_\_\_