**Inspection Report Template – Electronic Version**

**Purpose**

This Inspection Report Template (or “template”) was designed to assist you in preparing inspection reports for the WYPDES Large Construction General Permit and was adapted from EPA’s 2012 Construction General Permit (CGP) Inspection Report Template. Using this form is optional, but if you choose to use it will help you conduct/ document inspections that meet the requirements of Section 9.7 of the permit.

**Overview of Inspection Requirements**

Construction operators covered under both the Large and Small Construction WYPDES General Permit are subject to the following requirements in Part 9:

*Inspection Frequency (see Section 9.2)*

You are required to conduct inspections for ACTIVE construction sites either:

* Once every 7 calendar days; or
* Once every 14 calendar days and within 24 hours of a precipitation/ snow melt event of 0.5 inches or greater.

You are required to conduct inspections for INACTIVE construction sites:

* At least once every 30 days ONLY after earthwork/construction activities have ceased and permanent or temporary stabilization measures have been installed.

*Areas That Need to Be Inspected (see Part 9.3)*

During each inspection, you must inspect the following areas of your site:

* The construction site perimeters
* All BMPs
* Material, waste, or borrow areas covered by the permit, and equipment storage and maintenance areas;
* Areas where stormwater flows within the site;
* Areas where storm water discharges from the site.
* Areas where vehicles leave the construction site.
* Areas where vehicle maintenance occurs
* Areas where either permanent or temporary stabilization has been implemented.

*What to Check For During Your Inspection*

During your site inspection, you are required to check:

* Whether stormwater controls or pollution prevention practices require maintenance or corrective action, or whether new or modified controls are required;
* For the presence of conditions that could lead to spills, leaks, or other pollutant accumulations and discharges;
* Whether there are visible signs of erosion and sediment accumulation at points of discharge and to the channels and streambanks that are in the immediate vicinity of the discharge;
* If a stormwater discharge is occurring at the time of the inspection, whether there are obvious, visual signs of pollutant discharges; and
* If any permit violations have occurred on the site.

*Inspection Reports (see Part 9.7)*

Within 24 hours of completing each inspection, you are required to complete an inspection report that includes:

* Date/ Time of inspection;
* Names and titles of persons conducting the inspection;
* Summary of inspection findings;
* Corrective actions taken
* Dates and amounts of precipitation events that exceed 0.5 inches in a 24 hour period.
* Documentation of any changes made to the SWPPP and SWPPP site map.
* A statement indicating whether the site complies with the SWPPP or not.
* The inspection report must the SIGNED and CERTIFIED.

**Instructions for Using This Template**

This Electronic Version of the Inspection Report Template is intended to be filled out electronically. You can print of hard copies of this form to be used in the field if you don’t have electronic access. Keep in mind that this document is a template and not an “off-the-shelf” inspection report that is ready to use without some modification. You must first customize this form to include the specifics of your project in order for it to be useable for your inspection reports. The template includes text fields that direct you to populate the form with your specific site information (e.g., specific BMPs installed at your site, specific locations where they are installed). Once you have entered all of your site-specific information into these fields, you may use the completed form to complete inspection reports.

The following tips for using this template will help you ensure that the minimum permit requirements are met:

* **Review the inspection requirements.** Before you start developing your inspection report form, read the LCGP’s Part 9 inspection requirements. This will ensure that you have a working understanding of the permit’s underlying inspection requirements.
* **Complete all required text fields.** Fill out all text fields (marked with blue font). Only by filling out all fields will the template be compliant with the requirements of the permit. (Note: Where you do not need the number of rows provided in the template form for your inspection, you may delete these as you see fit. Or, if you need more space to document your findings, you may insert additional rows.) Specific instructions on what information to include in each text field is included in each text field. The fields were developed so that the instructions disappear once you start typing.
* **Use your site map to document inspection findings.** In several places in the template, you are directed to specify the location of certain features of your site, including where stormwater controls are installed and where you will be stabilizing exposed soil. You are also asked to fill in location information for unsafe conditions and the locations of any discharges occurring during your inspections. Where you are asked for location information, WY DEQ encourages you to reference the point on your SWPPP site map that corresponds to the requested location on the inspection form. Using the site map as a tool in this way will help you conduct efficient inspections, will assist you in evaluating problems found, and will ensure proper documentation.
* **Document changes to the SWPPP and SWPPP site map as a result of the inspection.** If you identify any changes that need to be made to the site to ensure compliance with the permit those changes MUST be made to the SWPPP and SWPPP site map. The SWPPP and SWPPP site map should change with the addition or removal of BMPs on site and changes to construction activities in order to remain current to project conditions. You are in violation of the permit if the SWPPP and SWPPP site map don’t reflect current project conditions.
* **Sign and certify each inspection report.** Each inspection report must be signed and certified by the permittee to be considered complete. Where your inspections are carried out by a contractor or subcontractor, it is recommended that you also have the form signed and certified by the inspector, in addition to the signature and certification required of the permitted operator. The template includes a signature block for both parties.
* **Include the inspection form with your SWPPP.** Once your form is complete, make sure to include a copy of the inspection form in your SWPPP.
* **Retain copies of all inspection reports with your records.** You must also retain in your records copies of all inspection reports in accordance with the requirements in Part 9.10 of the LCGP. These reports must be retained for at least 3 years from the date your permit coverage expires or is terminated.

**Section-by-Section Instructions**

You will find specific instructions corresponding to each section of the report form at the end of this template. These instructions provide you with more details in terms of what EPA expects to be documented in these reports.

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| **General Information** | |
| **Inspector Name, Title & Contact Information** | [Enter the inspector’s name, title, and contact information (company name, address, email, and phone).] |
| **Present Phase of Construction** | [Specify the current phase of the project.] |
| **Inspection Location** | [If multiple inspections are required for this project, specify location where this inspection is being conducted. If necessary, complete additional forms for each location.] |
| **Inspection Frequency**  **Active Construction:**  Weekly  Every 14 days and within 24 hours of a precipitation event  **Inactive Construction:**   * Once per month (for stabilized areas ONLY) | |
| **Was this inspection triggered by a storm event?**  Yes  No  **If yes, how did you determined whether a 0.5” storm event has occurred?**  Rain gauge on site  Weather station representative of site. Specify weather station source: [Enter the source for your weather station data.]  **Total rainfall amount that triggered the inspection:** [Specify rainfall amount (in inches)] | |
| **Rainfall/Snow melt Amounts and Dates:** | |
| **Unsafe Conditions for Inspection**  **Were Inspections delayed due to unsafe conditions, access issues, or weather?**  Yes  No  **If “yes”, complete the following:**   * Describe the conditions that prevented you from conducting the inspection in this location:[Provide short description of the conditions preventing the inspection.] * Location where conditions were found: [Specify location(s) on the site where unsafe conditions were found.] | |

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| **Condition and Effectiveness of Erosion and Sediment (E&S) Controls (LCGP Part 7.3)** | | | | |
| **Type/Location of Erosion & Sediment Control**  **[Include [add add’l rows if applicable]** | **Repairs or Other Maintenance Needed?\***  (For effective BMPs in place that need attention to remain effective.) | **Corrective Action Required?\***  (1) A required storm water control was never installed, was installed incorrectly, or not in accordance with the requirements of permit 2) You become aware that the storm water controls you have installed and are maintaining are not effective enough 3) One of the prohibited discharges in Section 7.18 is occurring or has occurred. | **Date on Which Maintenance or Corrective Action First Identified?** | **Notes** |
| 1. [E&S control] [Location] 2. [E&S control] [Location] 3. [E&S control] [Location] 4. [E&S control] [Location] 5. [E&S control] [Location] 6. [E&S control] [Location] 7. [E&S control] [Location] 8. [E&S control] [Location] | Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No | Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No | [Enter date]    [Enter date]    [Enter date]    [Enter date]    [Enter date]  [Enter date]  [Enter date]  [Enter date]  [Enter date]  [Enter date] | [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here] |

**\* Note:** Erosion Controls are those practices/ devices designed to keep soil/sediment from moving. Examples may include preserving vegetation, temporary seeding, mulches, erosion control blankets, using water bars or other devices to divert storm water. Sedimentation control is used to prevent soil that has moved from its original location from leaving the site. Examples may include sediment barriers (straw waddles, silt fence, straw bales, gravel berms, sand bags), sediment traps and basins, track out controls, buffer strips, water bars/ water wings.

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| **Condition and Effectiveness of Pollution Prevention Measures (LCGP 7.15)** | | | | |
| **Type/Location of P2 Measures**  **[insert additional rows if applicable]** | **Repairs or Other Maintenance Needed?**  (For effective BMPs in place that need attention to remain effective.) | **Corrective Action Required?**  (1) A required storm water control was never installed, was installed incorrectly, or not in accordance with the requirements of permit 2) You become aware that the storm water controls you have installed and are maintaining are not effective enough 3) One of the prohibited discharges in Section 7.18 is occurring or has occurred. | **Date on Which Maintenance or Corrective Action First Identified?** | **Notes** |
| 1. [P2 practice] [Location] 2. [P2 practice] [Location] 3. [P2 practice] [Location] 4. [P2 practice] [Location] 5. [P2 practice] [Location] 6. [P2 practice] [Location] 7. [P2 practice] [Location] 8. [P2 practice] [Location] | Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No | Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No  Yes No | [Enter date]    [Enter date]    [Enter date]    [Enter date]    [Enter date]  [Enter date]  [Enter date]  [Enter date]  [Enter date]  [Enter date] | [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here] |

**\* Note:** Pollution Prevention Measures are designed to keep pollutants from leaving the site. Such pollutants may include wash waters, buildings materials (paints solvents, trash), landscape materials (fertilizers, pesticides), sanitary waste petroleum products, and other chemicals. Prohibited discharges are Concrete washout, Wash waters (from stucco, paint, form release oils, curing compounds and other construction materials), Vehicle/equipment operation and maintenenace materials (fuels and oils), Soaps and solvents used for vehicle washing.

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| **Stabilization of Exposed Soil (LCGP 7.14) *Must be initiated in disturbed areas when earth disturbing activities in an area have temporarily or permanently ceased for a period of time exceeding 14 calendar days.*** | | | |
| **Stabilization Area**  **[insert additional rows if applicable]** | **Stabilization Method** | **Have You Initiated Stabilization?** | **Notes** |
| 1. [Specific location that has been stabilized or to be stabilized] 2. [Specific location that has been stabilized or to be stabilized] 3. [Specific location that has been stabilized or to be stabilized] 4. [Specific location that has been stabilized or to be stabilized] 5. [Specific location that has been stabilized or to be stabilized] | [Specify type of stabilization]  [Specify type of stabilization]  [Specify type of stabilization]  [Specify type of stabilization]  [Specify type of stabilization] | YES [Enter date]  NO  YES [Enter date]  NO  YES [Enter date]  NO  YES [Enter date]  NO  YES [Enter date]  NO | [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here]  [Enter notes here] |

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| **Compliance Statement (LCGP 9.7.7) & Changes made to the SWPPP or SWPPP site map as a result of the inspection** **(LCGP Part 9.7.6)** | |
| **Was the site found to be in compliance with the SWPPP and with the permit?**  Yes  No  **If “no”, provide the following corrective actions taken to get the site into compliance with the SWPPP and the Permit.** | |
| **Corrective actions taken:** [Enter text here.] | |
| **Were any changes to the SWPPP or SWPPP site map required as a result of this inspection?**  Yes  No  **If “yes”, provide the following information for the amendments made.** | |
| **SWPPP or SWPPP Site Map Amendments**  **[insert additional rows if applicable]** | **Description of Amendments** |
| **1.** [Enter text here.] | Date the change was made: [Enter text here.]  Describe the change made:[Enter text here.]  If the change was made on the SWPPP site map indicate the location/s of the changes. [Enter text here.] |
| **2.** [Enter text here.] | Date the change was made: [Enter text here.]  Describe the change made:[Enter text here.]  If the change was made on the SWPPP site map indicate the location/s of the changes. [Enter text here.] |

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| **Certification and Signature by Permittee** |
| “I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.”  **Signature of Permittee or**  **“Duly Authorized Representative”: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:**  **Printed Name and Affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Instructions for Filling Out “General Information” Section on Page 1**

**Inspector Name, Title & Contact Information**

Provide the name of the person(s) (either a member of your company’s staff or a contractor or subcontractor) that conducted this inspection. Provide the inspector’s name, title, and contact information as directed in the form.

**Present Phase of Construction**

If this project is being completed in more than one phase, indicate which phase it is currently in.

**Inspection Location**

If your project has multiple locations where you conduct separate inspections, specify the location where this inspection is being conducted. If only one inspection is conducted for your entire project, enter “Entire Site.” If necessary, complete additional inspection report forms for each separate inspection location.

**Inspection Frequency**

Check the box that describes the inspection frequency that applies to you.

**Was This Inspection Triggered by a 0.5 Inch Storm Event?**

If you were required to conduct this inspection because of a 0.5 inch (or greater) rain event, indicate whether you relied on an on-site rain gauge or a nearby weather station (and where the weather station is located). Also, specify the total amount of rainfall for this specific storm event.

**Unsafe Conditions for Inspection**

Inspections are not required where a portion of the site or the entire site is subject to unsafe conditions. See LCGP 9.8. These conditions should not regularly occur, and should not be consistently present on a site. Generally, unsafe conditions are those that render the site (or a portion of it) inaccessible or that would pose a significant probability of injury to applicable personnel. Examples could include severe storm or flood conditions, high winds, and downed electrical wires.

If your site, or a portion of it, is affected by unsafe conditions during the time of your inspection, provide a description of the conditions that prevented you from conducting the inspection and what parts of the site were affected. If the entire site was considered unsafe, specify the location as “Entire site”

**Instructions for Filling Out the “Erosion and Sediment Control” Table on Page 2**

**Type and Location of E&S Controls**

Provide a list of all erosion and sediment (E&S) controls that your SWPPP indicates will be installed and implemented at your site. You may group your E&S controls on your form if you have several of the same type of controls (e.g., you may group “Inlet Protection Measures”, “Perimeter Controls”, and “Stockpile Controls” together on one line), but if there are any problems with a specific control, you must separately identify the location of the control, whether repairs or maintenance or corrective action are necessary, and in the notes section you must describe specifics about the problem you observed.

**Repairs or Other Maintenance Needed?**

Answer “yes” if the E&S control requires a repair of any kind (due to normal wear and tear, or as a result of damage) or requires maintenance in order for the control to continue operating effectively. At a minimum, maintenance is required in the following specific instances: (1) for perimeter controls, whenever sediment has accumulated to ½ or more the above-ground height of the control; (2) where sediment has been tracked-out onto the surface of off-site streets or other paved areas; (3) for inlet protection measures, when sediment accumulates, the filter becomes clogged, and/or performance is compromised; and (4) for sediment basins, as necessary to maintain at least ½ of the design capacity of the basin. Note: In many cases, “yes” answers are expected and indicate a project with an active operation and maintenance program. You should also answer “yes” if work to fix the problem is still ongoing from the previous inspection.

**Corrective Action Needed?**

Answer “yes” if during your inspection you found any of the following conditions to be present: (1) a required E&S control was never installed, was installed incorrectly or (2) you become aware that the inadequacy of the E&S control has led to an exceedance of an applicable water quality standard. If you answer “yes”, you must take corrective action. Note: You should answer “yes” if work to fix the problem from a previous inspection is still ongoing.

**Date on Which Maintenance or Corrective Action First Identified?**

Provide the date on which the condition that triggered the need for maintenance or corrective action was first identified. If the condition was just discovered during this inspection, enter the inspection date. If the condition is a carryover from a previous inspection, enter the original date of the condition’s discovery.

**Notes**

For each E&S control and the area immediately surrounding it, note whether the control is properly installed and whether it appears to be working to minimize sediment discharge. Describe any problem conditions you observed such as the following, and why you think they occurred as well as actions (e.g., repairs, maintenance, or corrective action) you will take or have taken to fix the problem:

1. Failure to install or to properly install a required E&S control
2. Damage or destruction to an E&S control caused by vehicles, equipment, or personnel, a storm event, or other event
3. Mud or sediment deposits found downslope from E&S controls
4. Sediment tracked out onto paved areas by vehicles leaving construction site
5. Noticeable erosion at discharge outlets or at adjacent streambanks or channels
6. Erosion of the site’s sloped areas (e.g., formation of rills or gullies)
7. E&S control is no longer working due to lack of maintenance

For buffer areas, make note of whether they are marked off as required, whether there are signs of construction disturbance within the buffer, which is prohibited under the LCGP, and whether there are visible signs of erosion resulting from discharges through the area.

If repairs, maintenance, or corrective action is required, briefly note the reason. If repairs, maintenance, or corrective action have been completed, make a note of the date it was completed and what was done. *If corrective action is required, note that you will need to complete a separate corrective action report describing the condition and your work to fix the problem*.

**Instructions for Filling Out the “Pollution Prevention (P2) Practice” Table on Page 3**

**Type and Location of P2 Controls**

Provide a list of all pollution prevention (P2) practices that are implemented at your site. This list must include all P2 practices required by Part 7.15, and those that are described in your SWPPP.

**Repairs or Other Maintenance Needed?**

Answer “yes” if the P2 practice requires a repair of any kind (due to normal wear and tear, or as a result of damage) or requires maintenance in order for the control to continue operating effectively. Note: In many cases, “yes” answers are expected and indicate a project with an active operation and maintenance program.

**Corrective Action Needed?**

Answer “yes” if during your inspection you found any of the following conditions to be present: (1) a required P2 practice was never installed, was installed incorrectly; (2) you become aware that the inadequacy of the P2 practice has led to an exceedance of an applicable water quality standard or, (3) one of the “prohibited discharges” listed in LCGP Part 7.18 is occurring or has occurred. If you answer “yes”, you must take corrective action. Note: You should answer “yes” if work to fix the problem from a previous inspection is still ongoing.

**Date on Which Maintenance or Corrective Action First Identified?**

Provide the date on which the condition that triggered the need for maintenance or corrective action was first identified. If the condition was just discovered during this inspection, enter the inspection date. If the condition is a carryover from a previous inspection, enter the original date of the condition’s discovery.

**Notes**

For each P2 control and the area immediately surrounding it, note whether the control is properly installed, whether it appears to be working to minimize or eliminate pollutant discharges, and whether maintenance or corrective action is required. Describe problem conditions you observed such as the following, and why you think they occurred, as well as actions you will take or have taken to fix the problem:

1. Failure to install or to properly install a required P2 control
2. Damage or destruction to a P2 control caused by vehicles, equipment, or personnel, or a storm event
3. Evidence of a spill, leak, or other type of pollutant discharge, or failure to have properly cleaned up a previous spill, leak, or other type of pollutant discharge
4. Spill response supplies are absent, insufficient, or not where they are supposed to be located
5. Improper storage, handling, or disposal of chemicals, building materials or products, fuels, or wastes
6. P2 practice is no longer working due to lack of maintenance

If repairs, maintenance, or corrective action is required, briefly note the reason. If repairs, maintenance, or corrective action have been completed, make a note of the date it was completed and what was done. *If corrective action is required, note that you will need to complete a separate corrective action report describing the condition and your work to fix the problem*.

**Instructions for Filling Out the “Stabilization of Exposed Soil” Table on Page 4**

**Stabilization Area**

List all areas where soil stabilization is required to begin because construction work in that area has permanently stopped or temporarily stopped (i.e., work will stop for 14 or more days), and all areas where stabilization has been implemented.

**Stabilization Method**

For each area, specify the method of stabilization (e.g., hydroseed, sod, planted vegetation, erosion control blanket, mulch, rock).

**Have You Initiated Stabilization**

For each area, indicate whether stabilization has been initiated.

**Notes**

For each area where stabilization has been initiated, describe the progress that has been made, and what additional actions are necessary to complete stabilization. Note the effectiveness of stabilization in preventing erosion. If stabilization has been initiated but not completed, make a note of the date it is to be completed. If stabilization has been completed, make a note of the date it was completed. If stabilization has not yet been initiated, make a note of the date it is to be initiated, and the date it is to be completed.

**Instructions for Filling Out the “Compliance Statement & Changes Made to the SWPPP or SWPPP Site Map” Table on Page 4**

**Was the site in compliance with the SWPPP and the permit?**

During your inspection, determine if the site was in compliance with the SWPPP and the permit. If the site was in compliance, answer “yes” and skip to the next section. If the site was not in compliance with the SWPPP and the permit, answer “no” and describe the corrective actions taken to get the site into compliance with the SWPPP and the permit.

**Were Changes to the SWPPP or SWPPP site map made/required as a result of this inspection?**

During your inspection, document all changes to BMPs and construction activities on the SWPPP site map and in the SWPPP. If changes were made, answer “yes” and complete the questions below regarding the specific changes made. If no changes were required, answer “no” and skip to the next page.

**SWPPP/ SWPPP site map amendment documentation** (repeat as necessary if there are multiple points of discharge)

*Date of change.* Specify the date the amendment to the SWPPP or site map was completed.

*Describe the change.* Specifically describe how the SWPPP was changed or how the SWPPP site map was changed.

*SWPPP site map change locations.* Where on the site were changes made and then added to the SWPPP site map.

**Instructions for Signature/Certification on Page 5**

Each inspection report must be signed and certified to be considered complete.

**Contractor or Subcontractor Signature and Certification**

Where a contractor or subcontractor is relied on to carry out the inspection and complete the inspection report, you should require the inspector to sign and certify each report. Note that this does not relieve the permitted operator of the requirement to sign and certify the inspection report as well.

**Signature and Certification by Permittee**

At a minimum, the inspection report must be signed by either (1) the person who signed the NOI, or (2) a duly authorized representative of that person. The following requirements apply to scenarios (1) and (2):

If the signatory will be the person who signed the NOI for permit coverage, as a reminder, that person must be one of the following types of individuals:

* *For a corporation*: A responsible corporate officer. For the purpose of this subsection, a responsible corporate officer means: (i) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or (ii) the manager of one or more manufacturing, production, or operating facilities, provided, the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements; and where authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
* *For a partnership or sole proprietorship*: A general partner or the proprietor, respectively.
* *For a municipality, state, federal, or other public agency*: Either a principal executive officer or ranking elected official. For purposes of this subsection, a principal executive officer of a federal agency includes (i) the chief executive officer of the agency, or (ii) a senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA).

If the signatory will be a duly authorized representative, the following requirements must be met:

The authorization is made in writing by the person who signed the NOI (see above);

The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity such as the position of plant manager, operator of a well or a well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company. (A duly authorized representative may thus be either a named individual or any individual occupying a named position); and

The signed and dated written authorization is included in the SWPPP. A copy must be submitted to EPA, if requested.