

**APPENDIX G**  
**ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION REPORTS**





### ANNUAL COMPREHENSIVE SITE COMPLIANCE EVALUATION REPORT

b. In need of modification?  Yes  No If yes, describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

5. Are additional BMPs needed?  Yes  No If yes, describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

#### CORRECTIVE ACTIONS

If the answer to evaluation item #4 (part a or b) or #5 is YES, then initiate corrective actions using the *BMP INCIDENT AND CORRECTIVE ACTION REPORT*.

Is a *BMP INCIDENT AND CORRECTIVE ACTION REPORT* attached?  Yes  No

#### COMPLIANCE EVALUATION AND REPORT SIGNATURE

I have evaluated the above compliance items and the terms and conditions of the Multi-Sector Storm Water Permit and I certify that the facility (is) (is not) in compliance with the terms and conditions of the permit and the SWPPP. I further 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 fines and imprisonment for knowing violations.

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone Number: \_\_\_\_\_