

Port of Oakland
Airport-wide Storm Water Pollution Prevention Plan
Monthly Dry Weather Inspection Form
 Revised June 30, 2015

General Information						
Facility Name						
WDID No.		WDID # 2 011002822				
Date of Inspection		Start/End Time				
Inspector's Name(s)						
Inspector's Title(s)						
Inspector's Phone Number						
Inspector's Signature						
Dry Weather Visual Observations*						
Are there any spills/leaks observed at the time of inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe:						
Have any previously unidentified discharges of pollutants occurred since the last inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe:						
Are there any discharges occurring at the time of inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, note the presence of any of the following: <input type="checkbox"/> Sheen <input type="checkbox"/> Discoloration <input type="checkbox"/> Odor <input type="checkbox"/> Trash/Debris <input type="checkbox"/> Other: Describe all checked above:						
Observations						
Location	Observations	Is NSWD** Present?	Potential Source(s) of NSWD	Corrective Action	Person Contacted	Date Corrective Action Completed
		<input type="checkbox"/> Yes <input type="checkbox"/> No				
		<input type="checkbox"/> Yes <input type="checkbox"/> No				
		<input type="checkbox"/> Yes <input type="checkbox"/> No				
		<input type="checkbox"/> Yes <input type="checkbox"/> No				

*Monthly visual observations will be conducted during daylight hours of normally scheduled facility operation and on days without precipitation.

** Non-Storm Water Discharge (i.e., oil, grease, fuel, condensate water, fire hydrant flushing)

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Areas of Industrial Materials or Activities exposed to storm water

Below is a list of areas that should be assessed during routine inspections. Customize this list as needed for the specific types of industrial materials, activities, or structural BMPs at your facility.

	Area/Activity	Inspected?	Controls Adequate (appropriate, effective, and operating)?	Corrective Action Needed and Notes
1	Maintenance areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Fueling areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Waste handling and disposal areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4	Outdoor Equipment operations	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Material loading/unloading and storage areas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Non-storm water/ illicit connections***	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	General Housekeeping	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	

*** Include a description of the source, quantity, frequency, and characteristics of the non-storm water discharges, associated drainage area, and whether it is an authorized (e.g., condensate water, fire hydrant water, drinking fountain water) or unauthorized (e.g., fuel, grease, oil, solvent, etc.) non-storm water discharge .

Non-Compliance

Describe any incidents of non-compliance observed and not described above:
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If you have any questions please contact Douglas Herman, Port Environmental Scientist at (510) 627-1184.