

Visual Inspection Checklist

Inspector: David Bennett

Date: 5-22-24

Time: 0857 Temperature: 71°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Receiving Pond
Color - Red/Green
Floating Solids - some Plastic Bottles
upper SWM
Clarity - Green/Brown

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling Date: 5-29-24

Time: 7:00 AM Temperature: 58° Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Bottles

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling

Date: 6/6/24

Time: 11:05 Temperature: 87°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Bottles

COPY

Visual Inspection Checklist

Inspector: Richard Hestberg

Date: 6/2/24

Time: 12:05 Temperature: 83°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion:

COPY

Visual Inspection Checklist

Inspector: Richard Hotelling

Date: 6/19/24

Time: 8:46 am Temperature: 68°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Bottles

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling Date: 6/26/24
 Time: 2:29 Temperature: 92 Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input checked="" type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Bottles

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling Date: 7/3/24
 Time: 11:03 Temperature: 74° Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Better

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling Date: 7/10/24
 Time: 3:32 Temperature: 82° Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Bottles

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling

Date: 7/18/24

Time: 8:29 Temperature: 70°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Battles

COPY

Visual Inspection Checklist

Inspector: Richard Hatalvy

Date: 7/25/24

Time: 8:32 Temperature: 70°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Diff/Es

COPY

Visual Inspection Checklist

Inspector: Richard Hotelling

Date: 8-2-24

Time: 12:35 Temperature: 86°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion:

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling Date: 8-8-24
 Time: 2:25 Temperature: 88° Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Bottles

COPY

Visual Inspection Checklist

Inspector: Richard Hatfield

Date: 8-14-24

Time: 8:45 Temperature: 68°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Batter

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling Date: 8-24-24

Time: 12:10 Temperature: 73° Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Bottles

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling Date: 8-31-24

Time: 9:00 Temperature: 74° Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Baffles

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling
 Date: 9-7-24
 Time: 12:07 Temperature: 71°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Baffles

COPY

Visual Inspection Checklist

Inspector: Richard Hataling Date: 9-14-24

Time: 9:11 Temperature: 71° Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Baffles

COPY

Visual Inspection Checklist

Inspector: Richard Hotelling

Date: 9/18/24

Time: 1:45 Temperature: 71°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Best

COPY

Visual Inspection Checklist

Inspector: Richard Hotaling

Date: 9/28/24

Time: 9:50 Temperature: 63°

Conditions: Clear Overcast Rain/Snow

Instructions: Observing from the periphery of the treatment system, note the following. Note all specific observations below:

	Receiving Pond	Filtration Pond	Upper SWM Pond	Lower SWM Pond	SWM Pond Outfall
Odor	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Color	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Clarity	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> See Discussion
Floating Solids	<input type="checkbox"/> None <input checked="" type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Foam	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Oily Sheen	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion
Other Indicators of pollution	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion	<input checked="" type="checkbox"/> None <input type="checkbox"/> See Discussion

Discussion: Battles HELENE STORM

COPY