# Site Inspection Reports

**Instructions:**

- Include in your records copies of all routine facility inspection reports completed for the facility.
- The sample inspection report is consistent with the requirements in the 2016 Massachusetts MS4 Permit relating to site inspections. **If MassDEP provides you with an inspection report, use that form.**

**Using the Sample Site Inspection Report**

- This inspection report is designed to be customized according to the specific control measures and activities at your facility. For ease of use, you should take a copy of your site plan and number all of the stormwater control measures and areas of industrial activity that will be inspected. A brief description of the control measures and areas that were inspected should then be listed in the site-specific section of the inspection report.
- You can complete the items in the "General Information" section that will remain constant, such as the facility name and inspector (if you only use one inspector). Print out multiple copies of this customized inspection report to use during your inspections.
- When conducting the inspection, walk the site by following your site map and numbered control measures/areas of industrial activity to be inspected. Also note whether the "Areas of Materials or Activities exposed to stormwater" have been addressed (customize this list according to the conditions at your facility). Note any required corrective actions and the date and responsible person for the correction.

# Stormwater Site Inspection Report

| General Information | | | |
|---|---|---|---|
| **Facility Name** | Town of Belmont DPW | | |
| **Date of Inspection** | 11/10/2025 | **Start/End Time** | 10:00 AM – 10:30 AM |
| **Inspector's Name(s)** | Emily Bonaccorso | | |
| **Inspector's Title(s)** | Stantec Project Manager; Project Engineer | | |
| **Inspector's Contact Information** | Emily.Bonaccorso@Stantec.com | | |
| **Inspector's Qualifications** | Engineer | | |

**Weather Information**

**Weather at time of this inspection?**
❑ Clear ☒Cloudy ☒ Rain ❑ Sleet ❑ Fog ❑ Snow ❑ High Winds
❑ Other: Temperature: 50 F

**Have any previously unidentified discharges of pollutants occurred since the last inspection?** ❑Yes ☒No
**If yes, describe:**

**Are there any discharges occurring at the time of inspection?** ☒Yes ❑No
**If yes, describe:** Stormwater Discharge from ongoing several day rain event

**Control Measures**

- *Number the structural stormwater control measures identified in your SWPPP on your site map and list them below (add as many control measures as are implemented on-site). Carry a copy of the numbered site map with you during your inspections. This list will ensure that you are inspecting all required control measures at your facility.*
- *Describe corrective actions initiated, date completed, and note the person that completed the work in the Corrective Action Log.*

| | **Structural Control Measure** | **Control Measure is Operating Effectively?** | **If No, In Need of Maintenance, Repair, or Replacement?** | **Corrective Action Needed and Notes** (identify needed maintenance and repairs, or any failed control measures that need replacement) |
|---|---|---|---|---|
| 1 | Oil/Water Separators | ☒Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | None. Fleet Manager reported an outside contractor is hired to perform annual maintenance on the oil/water separators. Maintenance occurs every two years and was last performed October 2024. Routine maintenance of the OWS in the "Paint Shop" will occur within the next several months. |
| 2 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |
| 3 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |
| 4 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |

| | **Structural Control Measure** | **Control Measure is Operating Effectively?** | **If No, In Need of Maintenance, Repair, or Replacement?** | **Corrective Action Needed and Notes** (identify needed maintenance and repairs, or any failed control measures that need replacement) |
|---|---|---|---|---|
| 5 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |
| 6 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |
| 7 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |
| 8 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |
| 9 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |
| 10 | | ❑Yes ❑No | ❑ Maintenance<br>❑ Repair<br>❑ Replacement | |

**Areas of Materials or Activities exposed to stormwater**

*Below are some general areas that should be assessed during routine inspections. Customize this list as needed for the specific types of materials or activities at your facility.*

| | **Area/Activity** | **Inspected?** | **Controls Adequate (appropriate, effective, and operating)?** | **Corrective Action Needed and Notes** |
|---|---|---|---|---|
| 1 | **Material loading/unloading and storage areas** | ☒Yes ❑No ❑ N/A | ❑Yes ☒No | Material storage bays near the fueling station have been extended with more blocks, however staff stored leaves/yard waste in this area incorrectly, and it has overflowed and began to flow towards the nearby catch basin. The Facilities Manager had already instructed staff that this was not their proper storage space and that they need to be stored in the proper bay. He expects the waste to be moved by the end of the week. |
| 2 | **Equipment operations and maintenance areas** | ☒Yes ❑No ❑ N/A | ☒Yes ❑No | |
| 3 | **Fueling areas** | ☒Yes ❑No ❑ N/A | ☒Yes ❑No | |
| 4 | **Outdoor vehicle and equipment washing areas** | ☒Yes ❑No ❑ N/A | ☒Yes ❑No | |
| 5 | **Waste handling and disposal areas** | ☒Yes ❑No ❑ N/A | ☒Yes ❑No | |

| | Area/Activity | Inspected? | Controls Adequate (appropriate, effective, and operating)? | Corrective Action Needed and Notes |
|---|---|---|---|---|
| 6 | **Erodible areas/construction** | ☒Yes ❑No ❑ N/A | ☒Yes ❑No | |
| 7 | **Non-stormwater/ illicit connections** | ❑Yes ❑No ☒ N/A | ❑Yes ❑No | |
| 8 | **Salt storage piles or pile containing salt** | ☒Yes ❑No ❑ N/A | ☒Yes ❑No | |
| 9 | **Dust generation and vehicle tracking** | ☒Yes ❑No ❑ N/A | ☒Yes ❑No | |
| 10 | **(Other)** | ❑Yes ❑No ❑ N/A | ❑Yes ❑No | |
| 11 | **(Other)** | ❑Yes ❑No ❑ N/A | ❑Yes ❑No | |
| 12 | **(Other)** | ❑Yes ❑No ❑ N/A | ❑Yes ❑No | |

**Non-Compliance**

Describe any incidents of non-compliance observed and not described above:

**Additional Control Measures**

| Describe any additional control measures or changes to the SWPPP needed to comply with the permit requirements: |
|---|
| |

**Notes**

| Use this space for any additional notes or observations from the inspection: |
|---|
| |

**Print inspector name and title:** Emily Bonaccorso, Project Engineer

**Signature:** Emily Bonaccorso **Date:** 11/10/2025

# Quarterly Visual Assessment Reports – additional form when stormwater discharge is occurring

**Instructions:**

- Include in your records copies of all quarterly visual assessment reports completed for the facility. An example quarterly visual assessment report can be found on the following page.
- At least one quarterly inspection per year must occur while stormwater is discharging.

## Quarterly Visual Assessment Form– additional form when stormwater discharge is occurring

(Complete a separate form for each outfall you assess)

Name of Facility: Town of Belmont DPW

Outfall Name: N/A "Substantially Identical Outfall"? ☒ No ☐ Yes (identify substantially identical outfalls):

Person(s)/Title(s) collecting sample :Emily Bonaccorso, Project Engineer

Person(s)/Title(s) examining sample: :Emily Bonaccorso, Project Engineer

| Date & Time Discharge Began (approx.): | Date & Time Visual Sample Collected: | Date & Time Visual Sample Examined: |
|---|---|---|
| 11/08/2025; 8:00PM | 11/10/2025, 10:00 AM | 11/10/2025, 11:00 AM |

Nature of Discharge: ☒ Rainfall ☐ Snowmelt

**Parameter**

Color ☐ None ☒ Other (describe): Brownish Gray

Odor ☐ None ☐ Musty ☐ Sewage ☐ Sulfur ☐ Sour ☒ Petroleum/Gas ☐ Solvents ☐ Other (describe): Slight Petroleum Smell

Clarity ☐ Clear ☐ Slightly Cloudy ☒ Cloudy ☐ Opaque ☐ Other

Floating Solids ☐ No ☒ Yes (describe): Small floating solids likely from weeds found in manhole

Settled Solids* ☐ No ☒ Yes (describe): Dirt

Suspended Solids ☐ No ☒ Yes (describe): Small flecks

Foam (gently shake sample) ☒ No ☐ Yes (describe):

Oil Sheen ☒ None ☐ Flecks ☐ Globs ☐ Sheen ☐ Slick ☐ Other (describe):

Other Obvious Indicators of Stormwater Pollution ☒ No ☐ Yes (describe):

* Observe for settled solids after allowing the sample to sit for approximately one-half hour.

**Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).**

The outfall of the DPW discharges into a main storm drain that carries a large amount of runoff from the Town. Water was sampled from the most downstream portion of this drain line, which was heavily flowing from the rain event. There is no indication that the characteristics of solids, color, and odor found above in the sample taken at this manhole are representative of polluted water flowing from the DPW Yard, rather than from an upstream source.

A. Name: Emily Bonaccorso B. Title: Civil Engineer

C. Signature: Emily Bonaccorso D. Date Signed: 11/10/2025