

WESTMINSTER

OPERATOR COMPLIANCE FOLLOW-UP FORM

Project Information

Subdivision/Property Name:

Pond ID #.:

Location:

Admin/Owner Name(s):

Site Owner/Designee:

Corrective Actions

Date of inspection when inadequate or failure to maintain controls or pollutant discharges were noted:

Owner and/or owner designee must submit photo documentation demonstrating all corrective actions have been addressed. Photographs to be attached to this report and sent to:

Corrective Action Log				
ltem No.	Description of Items Needing Correction (can be taken directly from MS4 Compliance Inspection)	Photo #(s). for Work Completed	Date Completed	
1.				
2.				
3.				
4.				
5.				
6.				
7.				

8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

Operator Inspector Certification

I certify that the information in this Inspection Report is, to the best of my knowledge and belief, true, accurate, and complete.

Owner or Inspector's Printed Name:

Date:

Please note, this report may not include all deficiencies on your site. This MS4 oversight inspection is designed to assist the City in determining if this site's stormwater program is being consistently and effectively implemented.

Photo 1:	Photo 2:

Photo 3: Photo 4:

Photo 5:	Photo 6:

Photo 7:	Photo 8:	

Photo 9:	Photo 10:

Photo 11: Photo 12: