



# City of Oceanside Storm Water Inspection Form

**Inspection/Work Order #****Date/Time:****Program:** Facility Inspections**Facility Name:****Address****Contact Name:****Contact Phone #:****Reason:** Permit Inspection

<u>Item</u>	<u>Result</u>	<u>Comments</u>
-------------	---------------	-----------------

**TRAINING**

Annual Employee Training  
Documentation of Training

**CONNECTIONS**

Storm Drain Inlet Labeling  
Inspect for Illicit Connections and Illegal Discharges  
Storm Drain Conveyance System/Structures Maintained  
Materials at Hand and Employees trained in Spill Cleanup Procedures

**TRASH STORAGE/DISPOSAL AREAS**

Trash Storage/Disposal Area Clean & Regularly Inspected  
Trash Receptacles in Good Condition & Closed  
Materials at Hand for Trash Cleanup  
Grease Control/Collective Devices Maintained

**LOADING/UNLOADING AREAS**

Protection of Storm Drain Inlets Downhill of Loading/Unloading Areas  
Periodic Inspection/Cleaning of Loading/Unloading Areas  
Washing of Mats in Proper Areas  
Prevention of Spills/Leaks in Loading/Unloading Area

**OUTDOOR AREAS**

Drain Wash Areas to Sanitary Sewer  
Containment and Proper Disposal of Wash Water  
Proper Outdoor storage of Materials, Equipment and Haz. Mat.  
Roof Downspouts Routed to Pervious areas & Away from Work Areas  
Inspect and Maintain Equipment on Rooftop  
Inspect and Clean Rooftop of Materials and Substances  
Periodic Inspection/Cleaning of Grounds

**PARKING LOTS**

Trash Containers Located in Convenient Locations  
No Storage of Other Materials/Equipment in Parking Area  
Routine Cleaning of Parking and Outside Areas Using Dry Methods

**LANDSCAPING**

Prevent Spills, Leaks, Over-Application of Chemical Landscaping Products  
Prevent Over-irrigation  
Implement Non-chemical Pest Control Methods  
Proper Use/Disposal of Chemical Landscaping Products  
Periodic Inspection/Cleaning of Grounds and Landscaped Areas

**OTHER BEST MANAGEMENT PRACTICES**

Report Significant Spills to City and/or Other Agencies

**EFFECTIVENESS ASSESSMENT**

Level of Knowledge Regarding Storm Water Issues  
Level of Cleanliness, BPM implementation, Orderliness of Site

**Corrective Actions and Additional Comments****Contact Signature:****Date:****Inspector Signature:****Date:**