

Alaska Department of Environmental Conservation MSGP Annual Reporting Form

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Section I. General Informatio	n							
Facility Name					ermit Tracking	the start of the s	Ŧ	
Anchorage Maintar	nce stati	07			AKS - C	5255	8	
Facility Physical Address						Charles	1 7:- 0-4-	
Street		City			-	State	Zip Code	
5300 East Tudor		Anchorage			- Email	Alaska	99	507
Contact Person	Title		Phone	00	Email			
Jennifer Micolichek	Central Regi	on Eniv. Impact	269-56 Additional Insp		Jenite	Inspection D		Laska-gov
Lead Inspector's Name	Additional Inspect	or s Name	Additional Insp	ector s Na	ine		-2018	-
Tim Hanley						9-10	2010	
Section II. General Inspection						and a second		
 As part of this comprehensive sources, including areas when If NO, describe why not: 					τ [V Yes		No
Note: Complete Section III of this for	m for each indus	trial activity area insp	ected and inc	cluded in y	your SWPPP	or as newly d	efined, in	Section II
parts 2 and 3 below, where pollutan 2. Did this inspection identify a	ts may be expose	ed to storm water.				Yes		No
identified in your SWPPP?					ا د د باد دانه بر م			
If YES, for each location, d measures in place:	escribe the sourc	es of those storm wat	er and non-s	torm wat	er discharge	es and any ass	ociated co	ontrol
measures in place.								
								-

	For Agency Permit Tracking #:
3.	Did this inspection identify any sources of storm water or non-storm water discharges not Previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
	Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
	Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of an around outfalls, including flow dissipation measure to prevent scouring:
	around outfalls, including flow dissipation measure to prevent scouring:
	around outfalls, including flow dissipation measure to prevent scouring: Dur ditches leading to the drainage system worked well this year. No evidence of
	around outfalls, including flow dissipation measure to prevent scouring: Dur ditches leading to the drainage system worked well this year. No evidence of
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1	around outfalls, including flow dissipation measure to prevent scouring: Dur ditches leading to the drainage system worked well this year. No evidence of Pollutants entering the drainage system. The wattles located at our east gate are still in working order but will be replaced this summer
1	around outfalls, including flow dissipation measure to prevent scouring: Dur difches leading to the drainage system worked well this year. No evidence of collutants entring the drainage system. The wattles located at our east gate are still in working order but will be replaced this summer
5.	Du'r ditches kading to the drainage system worked well thi's year. No evidence of Pollutants entring the drainage system. The wattles located at our east gate are still in working order but will be replaced this summer Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge Ves No
1	around outfalls, including flow dissipation measure to prevent scouring: Duir ditches leading to the drainage system worked well this year. No evidence of Pollutants entring the drainage system. The wattles located at our east gate are still in working order but will be replaced this summer Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection?
1	Around outfalls, including flow dissipation measure to prevent scouring: Dusing difference beading to the drainage system worked well this year. No evidence of pollutants entering the drainage system. The wattles located atour east gate are still in working order but will be replaced this summer Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP
5.	around outfalls, including flow dissipation measure to prevent scouring: Duir ditches leading to the drainage system worked well this year. No evidence of Pollutants entring the drainage system. The wattles located at our east gate are still in working order but will be replaced this summer Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection?

For Agency U	56	З
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Section III. Industrial Activity Area Specific Findings		cking #:
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Complete one block for each industrial activity area where pollutants may be exposed to storm water. Co In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with storm wate Leaks or spills from industrial equipment, drums, tanks, and other containers; Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas.	er; 1	l industrial activity areas.
Industrial Activity Area: North west personal vehicle park		
1. Brief Description:	1	
All employees use this area to park thier vehicles .	during work	hours.
2. Are any control measures in need of maintenance or repair?	Yes	No No
3. Have any control measures failed and require replacement?	Yes	No No
4. Are any additional/revised control measures necessary in this area?	Yes	No
Industrial Activity Area: South east yard where 10,000 gal fuel t 1. Brief Description: This area is used to fuel our heavy equipment w gate is 10f3 places to enter or exit our yard.		
1. Brief Description: This area is used to fuel our heavy equipment w		
1. Brief Description: This area is used to fuel our heavy equipment w gate is 10f3 places to enter or exit our yard.	ith diesel.	The east
 Brief Description: This area is used to fuel our heavy equipment w gate is lof3 places to enter or exit our yard. Are any control measures in need of maintenance or repair? 	V Yes Yes	No No No No No

	For Agency Permit Tracking #:
Industrial Activity Area: North east parking area t 1. Brief Description:	East end of building,
This area is used to park our light de	uty pick ups when not in use
Atthe east end of the building is where	we store our cutting
edges for our graders, plow trucks & nose pla	
2. Are any control measures in need of maintenance or repair?	Yes No
3. Have any control measures failed and require replacement?	Yes V No
4. Are any additional/revised control measures necessary in this area?	Yes V No
If YES, to any of these three questions, provide a description of the problem: (Any the attached Corrective Action Form.)	y necessary corrective actions should be described on
Industrial Activity Area: South west over flow park, 1. Brief Description:	ng .
we use this area to park our oversize e,	eviloment and trailers
It also has power poles to plug our equipme	ent in during winter.
2. Are any control measures in need of maintenance or repair?	Yes No
3. Have any control measures failed and require replacement?	Yes Vo
4. Are any additional/revised control measures necessary in this area?	Yes V No
If YES, to any of these three questions, provide a description of the problem: (Any the attached Corrective Action Form.)	necessary corrective actions should be described on

전철 사람은 1996년 1월 1997년 1월 1998년 1월 1998년 1월 1998년 1월 1997년 1997년 1월 199

				Permit Tracking #:	For Agency (
this page for addition Include both correction address problems ide	for each specific condi onal corrective actions ive actions that have be	or reviews. een initiated or com ensive storm water	npleted since the last annual	etermining that no corrective action is report, and future corrective actions nee te on any outstanding corrective actions	eded to
1. Corrective Act	ion # 🔰	of	for this reporting pe	eriod.	
2. Is this correcti	ve action:				
An up	odate on a corrective	action from a pr	evious annual report; or		
Anev	w corrective action?				
3. Identify the co	ondition(s) triggering	the need for this	review:		
Unau	thorized release of d	lischarge			
Nume	eric effluent limitatio	n exceedance			
Contr	rol measures inadequ	uate to meet app	licable water quality stand	lards	
Contr	rol measures inadequ	uate to meet non	-numeric effluent limitatio	ons	
Contr	rol measures not pro	perly operated o	r maintained		
Chan	ge in facility operatio	ons necessitated o	change in control measure	25	
Avera	age benchmark value	exceedance			
Other	r (describe): Rep	lace the w	rattles at our	east gate ditches	5.
4. Briefly describ	e the nature of the p	roblem identified	1:		
	previous ye		r east gate c	unually dut to we	ar
. D. t					
5. Date problem		8-18			
6. How problem					
Comp	orehensive site inspe	ction			
Quar	terly visual assessme	nt			
Routi	ne facility inspection				
Notifi	ication by EPA or DE(0			
Other	r (describe):				
	or repairs to control			r investigate the problem (e.g., descr or if no modification is needed, basis	
wattles w	rill be replac	ed due to	annual wear,		
8. Did/will this co	prrective action requi	re modification c	of your SWPPP?	Yes No	

			Permit Tracking #:	For Agenci
 Date corrective action initiated: 	4-18-18			
0. Date corrective action completed:	1010	Or expected to be co	ompleted: 7-15	5-18
1. If corrective action not yet completed inspections and describe any remaini corrective action: The wattles are in (replaced due to annua	ng steps (including timefra	mes associated with e	he time of the comprehe each step) necessary to c	ensive site complete the
ection V. Annual Report Certificatio ompliance Certification	n	in de la decimiente de la companya de la companya Receiva de la companya		
Do you certify that your annual inspection hat, based upon the results of this inspect ompliance with the permit?			rmit, and Yes	No No
If NO, summarize why you are not in	compliance with the permit:			
Annual Report Certification				
Annual Report Certification I certify under penalty of law that this do accordance with a system designed to as Based on my inquiry of the person or per information submitted is, to the best of r significant penalties for submitting false Tim Hanley Name of Authorized Representative	ssure that qualified personr rsons who manage the syst my knowledge and belief, t	nel properly gather ar em, or those person rue, accurate, and co possibility of fine and	nd evaluate the informat directly responsible for g mplete. I am aware that	ion submitted athering the there are ing violations.
I certify under penalty of law that this do accordance with a system designed to as Based on my inquiry of the person or per information submitted is, to the best of r significant penalties for submitting false	ssure that qualified personr rsons who manage the syst my knowledge and belief, t information, including the SWPPP To	nel properly gather ar em, or those person rue, accurate, and co possibility of fine and	nd evaluate the informat directly responsible for g mplete. I am aware that I imprisonment for know Imothy han leye al mail	ion submitted athering the there are ing violations.
I certify under penalty of law that this do accordance with a system designed to as Based on my inquiry of the person or pen information submitted is, to the best of n	ssure that qualified personr rsons who manage the syst my knowledge and belief, t information, including the SWPPP To	nel properly gather ar em, or those person rue, accurate, and co possibility of fine and spector +	nd evaluate the informat directly responsible for g mplete. I am aware that I imprisonment for know	ion submitted athering the there are ing violations.



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

	For Agency Us Permit Tracking #:
3.	
And a second	
4.	Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
)	
5.	Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring:
	No sign of pollutants entering waterways or drainage system Melting snow at the time of inspection
6.	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified
Not	as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions? 8.1.5 Was addressed e: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of
	comprehensive storm water inspection.

Permit Tracking #: _

For Agency Use

Continu III Industrial Antivity Area Consider Lindings	and the second	
Section III. Industrial Activity Area Specific Findings Complete one block for each industrial activity area where pollutants may be exposed to storn	m water. Conv this page for additi	onal industrial activity areas
In reviewing each area, you should consider:	in nateri copy (inspage jer daeri	ener model nu denny breas.
 Industrial materials, residue, or trash that may have or could come into contact with 	storm water;	
 Leaks or spills from industrial equipment, drums, tanks, and other containers; Officient provide a diadustrial equipment of the second se	d and a start	
 Offsite tracking of industrial or waste materials from areas of no exposure to expose Tracking or blowing of raw, final, or waste material from areas of no exposure to exp 		
Industrial Activity Area: Fuel tank sight topen lot b	the second s	line
1. Brief Description:	chine main voir	
Diesel fuel + gasoline in one tank above ground	d. On cement pud	to collect
any spillage, spill kit in place.		
	a area These and h	attles in fourt
if the a to be to be the to a site of the said for the	der and in and al	and it all he
open lot behind main building is the old sand storm of the gate that leads to a side road. The watt monited, we will replace the wattles by 7-15-18	is acting good she	pe or win a
2. Are any control measures in need of maintenance or repair?	Yes	No
 Have any control measures failed and require replacement? 	Ves Ves	No
 Are any additional/revised control measures necessary in this area? 	Yes	No
If YES, to any of these three questions, provide a description of the problem the attached Corrective Action Form.)	n: (Any necessary corrective ac	tions should be described
wattles are in good condition but will be re	eplaced by 7-15-	18
Walling are in good condition but will be		
ndustrial Activity Area: Maintenance building. L. Brief Description:		
ndustrial Activity Area: Maintenance building. 1. Brief Description: 4 bays for equipment. 2 bays are used for	- Chugiak Fire	
ndustrial Activity Area: Maintenance building. L. Brief Description:	- Chugiak Fire	
ndustrial Activity Area: Maintenance building. 1. Brief Description: 4 bays for equipment. 2 bays are used for	- Chugiak Fire	
ndustrial Activity Area: Maintenance building. I. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill h	- chugiak Fire , kit inside,	department.
ndustrial Activity Area: Maintenance building. L. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill b . Are any control measures in need of maintenance or repair?	- chugiak Fire , kit inside,	department.
ndustrial Activity Area: Maintenance building. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill b Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement?	- chugiak Fire (kit inside, Yes Yes	No No
ndustrial Activity Area: Maintenance building. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill b Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area?	- chugiak Fire Kit inside, Yes Yes	No No No No
ndustrial Activity Area: Maintenance building. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill b Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement?	- chugiak Fire Kit inside, Yes Yes	No No No No
ndustrial Activity Area: Maintenance building. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill b Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem	- chugiak Fire Kit inside, Yes Yes	No No No No
ndustrial Activity Area: Maintenance building. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill b Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem	- chugiak Fire Kit inside, Yes Yes	No No No No
ndustrial Activity Area: Maintenance building. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill b Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem	- chugiak Fire Kit inside, Yes Yes	No No No No
 ndustrial Activity Area: Maintenance building. Brief Description: 4 bays for equipment. 2 bays are used for 2 bays are used for DOT. There is a spill N Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem 	- chugiak Fire Kit inside, Yes Yes	No No No No

Permit Tracking #: ____

P		The later sector water a sector of the	and the second second second second	and the second	COR. TANKING STATISTICS
	Idustrial Activity Area: Sand Storage building.				
1.	Brief Description: I large building to Store Sand and 5000 gal	. of	salt	brine,	
	The soogal tank is in a holding area. There	is a	50/	1 Kitinsid	e
	of the building.	i) h	750		
L					
2.	Are any control measures in need of maintenance or repair?		Yes	No No	
3.	Have any control measures failed and require replacement?		Yes	No	
4.	, and the second s		Yes	V No	
	If YES, to any of these three questions, provide a description of the problem: (Any necesson the attached Corrective Action Form.)	ary correct	tive action	ns should be describe	ed on
)					
Inc	dustrial Activity Area: Warm Storage building				
	Brief Description:				
	Building is used to store equipment. There is	aspi	TIK	it inside.	
2					_
2.	Are any control measures in need of maintenance or repair?		Yes	No	
3.	Have any control measures failed and require replacement?		Yes	No	
4.	,		Yes	No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessa the attached Corrective Action Form.)	ry correcti	ive action.	s should be described	lon
				2	
-					

	For Agency U Permit Tracking #:
Ci th In ou	ection IV. Corrective Actions complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy his page for additional corrective actions or reviews. Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to ddress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not een completed at the time of your previous annual report.
1.	. Corrective Action # of for this reporting period.
2.	. Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
	Average benchmark value exceedance
)	V Other (describe): Replace wattics by gate.
4. L	Briefly describe the nature of the problem identified: Nattles by the gate have been these I year. We will replace them by 7-15-18
F	
	Date problem identified: 4-18-18
6.	
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
	we will replace the wattles infront of the gate
)	
8.	Did/will this corrective action require modification of your SWPPP?

and the second second

			Permit Tracking #:	
9. Date corrective action initiated:	4-18-18			
10. Date corrective action complete		Or expected to be complet	ted: 7-15-	18
 If corrective action not yet comp inspections and describe any ren corrective action: 			e of the comprehen:	sive site
Section V. Annual Report Certific Compliance Certification	ation			Aleman State and a large state with the state of the stat
Do you certify that your annual inspe that, based upon the results of this ir compliance with the permit?			Yes	No No
If NO, summarize why you are	not in compliance with the permit:			
		ν,		
Annual Report Certification				
	is document and all attachment			
I certify under penalty of law that th				
I certify under penalty of law that th accordance with a system designed Based on my inquiry of the person o	to assure that qualified personn or persons who manage the syste	el properly gather and eva m, or those person directl	luate the information y responsible for gatl	n submitted. hering the
I certify under penalty of law that th accordance with a system designed Based on my inquiry of the person of information submitted is, to the bes	to assure that qualified personn or persons who manage the syste t of my knowledge and belief, tr	el properly gather and eva m, or those person directl ue, accurate, and complete	luate the informatior y responsible for gatl e. I am aware that the	n submitted. hering the ere are
I certify under penalty of law that the accordance with a system designed Based on my inquiry of the person of information submitted is, to the bes significant penalties for submitting f	to assure that qualified personn or persons who manage the syste t of my knowledge and belief, tr alse information, including the p	el properly gather and eva m, or those person directl ue, accurate, and complete ossibility of fine and impri	luate the informatior y responsible for gatl e. I am aware that the	n submitted. hering the ere are
I certify under penalty of law that th accordance with a system designed Based on my inquiry of the person of information submitted is, to the bes	to assure that qualified personn or persons who manage the syste t of my knowledge and belief, tr alse information, including the p	el properly gather and eva m, or those person directl ue, accurate, and complete ossibility of fine and impri	luate the informatior y responsible for gatl e. I am aware that the sonment for knowing	n submitted. hering the ere are gviolations.
I certify under penalty of law that the accordance with a system designed Based on my inquiry of the person of information submitted is, to the best significant penalties for submitting f	to assure that qualified personn or persons who manage the syste t of my knowledge and belief, tr alse information, including the p	el properly gather and eva m, or those person directl ue, accurate, and complete ossibility of fine and impri	luate the informatior y responsible for gatl e. I am aware that the	n submitted. hering the ere are gviolations.
I certify under penalty of law that the accordance with a system designed Based on my inquiry of the person of information submitted is, to the best significant penalties for submitting for Thim Hanley	to assure that qualified personn or persons who manage the syste t of my knowledge and belief, tr alse information, including the p	el properly gather and eva m, or those person directl ue, accurate, and complete ossibility of fine and impri	luate the information y responsible for gatl e. I am aware that the sonment for knowing ty-hanky @alas	n submitted. hering the ere are g violations.
I certify under penalty of law that the accordance with a system designed Based on my inquiry of the person of information submitted is, to the best significant penalties for submitting for Thim Hanley	to assure that qualified personn or persons who manage the syste t of my knowledge and belief, tr alse information, including the p	el properly gather and eva m, or those person directl ue, accurate, and complete ossibility of fine and impri	luate the information y responsible for gath e. I am aware that the sonment for knowing hy-hanley malas	n submitted. hering the ere are g violations.

Permit Tracking #: _

Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Informatio	n						
Facility Name				APDES P	ermit Trackin	g Number	
Girdwood Maintenance Station						AKS-05255	8
Facility Physical Address							
Street		City	Girdwood	-		State	Zip Code
	388 Toadstool rd.					Alaska	99587
Contact Person	Title				Email	and the second se	
Paul Bertholl		od Foreman			paul.bertholl@alaska.gov		
Lead Inspector's Name	Additional Inspect	or's Name	Additional Insp	ector's Nar	me	Inspection D	
Paul Bertholl							4/24/2018
Section II. General Inspection	n Findings						
If NO, describe why not:							
Note: Complete Section III of this for parts 2 and 3 below, where pollutan 2. Did this inspection identify a identified in your SWPPP? If YES, for each location, d	ts may be expose ny storm water	ed to storm water. or non-storm w	vater outfalls no	ot previo	usly [Yes	No No
measures in place:							

		Permit Tracking #: _	For Agency Us
3.	Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be prese control measures in place:	Yes Yes	No ses, and any
4.	Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resu	pe	A, no monitoring rformed iew:
5.	Describe any evidence of pollutants entering the drainage system or discharging to surface v	waters, and the co	ondition of and
So	around outfalls, including flow dissipation measure to prevent scouring: outh End BMP's catching sediment from winter sand. Will clean and repla		
No	orthwest end will get wattles installed as soon as snow cover melts.		
6.	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit,		
	since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identifier as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2	d 🗸 Yes	No
Noi	were addressed by these corrective actions? 8.1.5 Was addressed te: Complete the attached Corrective Action Form (Section 19) for each condition mentioned, including any		ed as a result of
this	comprehensive storm water inspection.		

Do	rm	it T	Tracki	na	# .	

Section III. Industrial Activity Area Specific Findings Complete one block for each industrial activity area where pollutants may be exposed to storm was In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with storm Leaks or spills from industrial equipment, drums, tanks, and other containers; Offsite tracking of industrial or waste materials from areas of no exposure to exposed are Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed Industrial Activity Area: East Side 1. Brief Description: Drainage leading to south end BMP's and outfall.	m water; eas; and
2. Are any control measures in need of maintenance or repair?	🗌 Yes 🖌 No
3. Have any control measures failed and require replacement?	🗌 Yes 🖌 No
4. Are any additional/revised control measures necessary in this area?	Yes 🖌 No
Industrial Activity Area: South End 1. Brief Description: BMP's in place and working well. Will clean and replace as ne	eeded.
2. Are any control measures in need of maintenance or repair?	Ves No
3. Have any control measures failed and require replacement?	Yes 🖌 No
4. Are any additional/revised control measures necessary in this area?	Yes 🖌 No
If YES, to any of these three questions, provide a description of the problem: (A the attached Corrective Action Form.) Winter sand collecting at wattles, will clean and replace as new	

Permit Tracking #:

Couthwoot oide		
Industrial Activity Area: Southwest side		
1. Brief Description:		
Entrance to facility and main traffic area.		
2. Are any control measures in need of maintenance or repair?		Yes 🖌 No
3. Have any control measures failed and require replacement?		Yes 🗸 No
5. Thave any control measures railed and require replacement:	· · ·	
4. Are any additional/revised control measures necessary in this ar	ea?	Yes 🖌 No
If YES, to any of these three questions, provide a description of the	e problem: (Any necessary correction	ve actions should be described or
the attached Corrective Action Form.)		
Industrial Activity Area: North End		
1. Brief Description:	n Need to install wattles	at he signing of he was
Supply storage, snow storage and equipment parking after snow cover melts.	g. Need to install wattles	s at beginning of berm
aller show cover mells.		
2. Are any control measures in need of maintenance or repair?		Yes 🖌 No
3. Have any control measures failed and require replacement?		Yes 🖌 No
4. Are any additional/revised control measures necessary in this ar	ea?	Yes No
If YES, to any of these three questions, provide a description of the		
the attached Corrective Action Form.)	e problem: (Any necessary correction	ve actions snoula be described of
I plan on installing wattles between beginning of berr	n and snow storage are	a.

Section IV. Corrective Actions Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews. Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report. 1. Corrective Action # 1 of 2 for this reporting period. 2. Is this corrective action: \checkmark An update on a corrective action from a previous annual report; or A new corrective action? 3. Identify the condition(s) triggering the need for this review: Unauthorized release of discharge Numeric effluent limitation exceedance Control measures inadequate to meet applicable water quality standards Control measures inadequate to meet non-numeric effluent limitations Control measures not properly operated or maintained Change in facility operations necessitated change in control measures Average benchmark value exceedance Other (describe): BMP Maintenance 1 4. Briefly describe the nature of the problem identified: Winter sand collecting at wattles. 5. Date problem identified: April 24, 2018 6. How problem was identified: Comprehensive site inspection Quarterly visual assessment Routine facility inspection Notification by EPA or DEC Other (describe): 7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination. Clean and replace wattles as needed. Wattles are working as designed. Yes No 8. Did/will this corrective action require modification of your SWPPP? 1

Permit Tracking #:

Permit Tracking #: ____

For Agency Use

9. Date corrective action initiated: April 24, 2018

10. Date corrective action completed:

Or expected to be completed: May 15, 2018

11. If corrective action not yet completed, provide the status of the corrective action as the time of the comprehensive site inspections and describe any remaining steps (including timeframes associated with each step) necessary to complete the corrective action:

Need snow cover to melt.

Permit Tracking #:

a second second second second second	Corrective Actions			
this page for	additional corrective ac	tions or reviews.	corrective action or a review determining that no co	
address prob		nprehensive storm wat	ompleted since the last annual report, and future cor ter inspection. Include an update on any outstanding	
1. Correcti	ve Action # 2	of 2	for this reporting period.	
2. Is this co	orrective action:			
	An update on a corre	ective action from a p	previous annual report; or	
	A new corrective act	ion?		
3. Identify	the condition(s) trigg	ering the need for th	is review:	
	Unauthorized releas	e of discharge		
	Numeric effluent lim	itation exceedance		
	Control measures in	adequate to meet ap	oplicable water quality standards	
	Control measures in	adequate to meet no	on-numeric effluent limitations	
	Control measures no	t properly operated	or maintained	
	Change in facility op	erations necessitated	d change in control measures	
	Average benchmark	value exceedance		
\checkmark	Other (describe): Im	prove effectiver	ness of the BMP	
	lescribe the nature of			
No BMP	between ditch ar	nd snow storage	e area.	
5. Date pro	oblem identified: Ap	oril 24, 2018		
6. How pro	oblem was identified:			
	Comprehensive site	inspection		
	Quarterly visual asse	ssment		
	Routine facility inspe	ction		
	Notification by EPA c	or DEC		
	Other (describe):			
	ations or repairs to co		taken to eliminate or further investigate the property of the	
Will instal	l wattles betweer	n berm and snow	w storage area as soon as snow cov	ver melt from area.
8. Did/will	this corrective action	require modification	n of your SWPPP?	No

		Permit Tracking #:
9. Date corrective action initiated: Apri	1 24, 2018	
10. Date corrective action completed:	Or expecte	^{ed to be completed:} May 15, 2018
	provide the status of the corrective	action as the time of the comprehensive site ated with each step) necessary to complete the
Section V. Annual Report Certification		
Compliance Certification		
Do you certify that your annual inspection that, based upon the results of this inspect compliance with the permit?		
If NO, summarize why you are not in a	compliance with the permit:	
Annual Report Certification		
I certify under penalty of law that this doo accordance with a system designed to ass Based on my inquiry of the person or pers information submitted is, to the best of m	sure that qualified personnel properly sons who manage the system, or tho ny knowledge and belief, true, accura	epared under my direction or supervision in y gather and evaluate the information submitted. se person directly responsible for gathering the ate, and complete. I am aware that there are of fine and imprisonment for knowing violations.
Paul Bertholl	Foreman	paul.bertholl@alaska.gov
Name of Authorized Representative	Title	Email
Paul Bertha	D ((April 25, 2018
Signatu	ire	Date Signed

Permit Tracking #____



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Information
Facility Name: Hiland Snow dump Sight
APDES Permit Tracking Number: AVS-052558
Facility Physical Address
Street:
City: Eagle River State: Alaska Zip: 99577
Lead Inspector's Name: Tim Hanley Title: Foreman SWPPP inspector
Additional Inspectors Names:
Contact Person: Tim Hauley Title: Foreman Phone: 907 440 8453 Email: Timothy, hanley@glaska.gov
Phone: 907 440 8453 Email: Timothy hanley@ glaska.gov
Inspection Date: 10-15-18
Section II. General Inspection Findings
1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to storm water?
'f NO, describe why not:
Note: Complete Section III of this form for each industrial activity area inspected and included in your SWPPP or as newly defined, in Section II parts 2 and 3 below, where pollutants may be exposed to storm water.
2. Did this inspection identify any storm water or non-storm water outfalls not previously identified in your
SWPPP?
If YES, for each location, describe the sources of those storm water and non-storm water discharges and any associated control measures in place:

Permit Tracking #
3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified Yes No
If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
4. Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots?
If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring: No pollutants entering the draining system. All watthes
at the outfall replaced on 10-15-18
6. Have you taken or do you plan to take and corrective actions, as specified in Part 3 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? V Yes No
If YES, how many conditions requiring review for corrective active as specified in Parts 3.1 and 3.2 of the MSGP were addressed by these corrective actions? All wattles at the outfall were replaced 10-15-18
Note: Complete the attached Corrective Action Form (Section IV) for each condition indentified, including any conditions identified as a result of

this comprehensive storm water inspection.

Permit Tracking #_____

Section III. Industrial Activity Area Specific Findings				
Complete one block for each industrial activity area where pollutants maractivity areas. In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into Leaks or spills from industrial equipment, drums, tanks, and other cont Offsite tracking of industrial or waste materials from areas of no expose Tracking or blowing of raw, final, or waste material from areas of no ex	contac ainers; ure to e	t with st xposed a	orm	water; ;; and
Industrial Activity Area: (Mou) Storgge		Sie	1	t
 Tracking or blowing of raw, final, or waste material from areas of no ex Industrial Activity Area: SNOW STORAGE 1. Brief Description: Snow STORAGE when remodire 	5	sn	ou	strom roadways
2. Are any control measures in need of maintenance or repair?		Yes	V	TNo
3. Have any control measures failed and require replacement?		Yes	V	
4. Are any additional/revised control measures necessary in this area?		Yes	Ī	· · · · · · · · · · · · · · · · · · ·
Industrial Activity Area:				
1. Brief Description:				
2. Are any control measures in need of maintenance or repair?		Yes		No
3. Have any control measures failed and require replacement?		Yes		No
4. Are any additional/revised control measures necessary in this area?		Yes		No
If YES to any of these three questions, provide a description of the prattached Corrective Action Form.)	obien	. (City i		
Industrial Activity Area:				
1. Brief Description:				
2. Are any control measures in need of maintenance or repair?	Г	Yes	Г	No
3. Have any control measures failed and require replacement?	Γ	Yes	Γ	No
4. Are any additional/revised control measures necessary in this area?		Yes		No
If YES to any of these three questions, provide a description of the pr attached Corrective Action Form.)	oblem	: (Any r	nece	ssary corrective actions should be described on the
)				

Permit Tracking #_____

		N	ote	: Copy this page and attach additional pages as necessary.	
ndustrial Activity Area:					
1. Brief Description:					
	_		_		
2. Are any control measures in need of maintenance or repair?		Yes		No	
3. Have any control measures failed and require replacement?	L	Yes		No	
4. Are any additional/revised control measures necessary in this area? If YES to any of these three questions, provide a description of the pro-		Yes		No	
attached Corrective Action Form.)	DIEI	n. (Any	nec	essary corrective actions should be described on the	
Industrial Activity Area:					
1. Brief Description:					
	_			•	
2. Are any control measures in need of maintenance or repair?	L	Yes		No	
J. Have any control measures failed and require replacement?		Yes		No	
4. Are any additional/revised control measures necessary in this area?		Yes	L	No	
If YES to any of these three questions, provide a description of the pro attached Corrective Action Form.)	bler	n: (Any i	nec	essary corrective actions should be described on the	
Industrial Activity Area:			_	14 miles 14 miles 14 f 1 miles	
1. Brief Description:					
2. Are any control measures in need of maintenance or repair?		Yes		No	
3. Have any control measures failed and require replacement?		Yes		No	
4. Are any additional/revised control measures necessary in this area?		Yes		No	
If YES to any of these three questions, provide a description of the pro attached Corrective Action Form.)	bler	n: (Any ı	nec	essary corrective actions should be described on the	
	-				

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Section IV. Corrective Actions
Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy chis page for additional corrective actions or reviews. Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.
1. Corrective Action # of for this reporting period.
2. Is this corrective action:
An update on a corrective action from a previous annual report; or
A new corrective action? A lentify the condition(s) triggering the need for this review:
Unauthorized release of discharge
Numeric effluent limitation exceedance
Control measures inadequate to meet applicable water quality standards
Control measures inadequate to meet non-numeric effluent limitations
Control measures not properly operated or maintained
Change in facility operations necessitated change in control measures
Average benchmark value exceedance
Other (describe):
4. Briefly describe the nature of the problem identified: All wattles at oulfall replaced 10-15-18
5. Date problem identified:
6. How problem was identified:
Comprehensive site inspection
Quarterly visual assessment
Routine facility inspection
Benchmark monitoring
 Notification by EPA or ADEC Other (describe):
7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modification are needed, basis for that determination: Wattles replaced $10-15-18$
8. Did/will this corrective action require modification of you SWPPP?
9. Date corrective action initiated:
10. Date corrective action completed: Or expected to be completed:
11. If corrective action not yet completed, provide the status of the corrective action as the time of the comprehensive site inspections and describe any remaining steps (including timeframes associated with each step) necessary to complete the corrective action:

Permit Tracking #____

Alaska Department of Environmental Conservation

MSGP Annual Reporting Form

Section I. General Information
Facility Name: Omalley Snow Storage Sight
APDES Permit Tracking Number:
Facility Physical Address
Street: Omalley E Old Seward Haly
City: Auchorage State: Alaska 8. Zip: 99507
Lead Inspector's Name: Tim Hanley Title: Foreman
Additional Inspectors Names:
Contact Person: Tim Hanley Title: SUPPP
Phone: 907 440 8453 Email: timothy. hanley@alaska. aby
Inspection Date: 10-15-18
Section II. General Inspection Findings
1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to storm water?
'f NO, describe why not:
Note: Complete Section III of this form for each industrial activity area inspected and included in your SWPPP or as newly defined, in Section II parts 2 and 3 below, where pollutants may be exposed to storm water.
2. Did this inspection identify any storm water or non-storm water outfalls not previously identified in your Yes Yes
If YES, for each location, describe the sources of those storm water and non-storm water discharges and any associated control measures in place:
MSGP Annual Report (October 2009) Page 1 of 6

Permit	Tracking	#
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3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified Yes Yes in your SWPPP?
If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
4. Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots?
If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring: All LIATTAS CLORE CEDIOCED IN
around outfalls, including flow dissipation measure to prevent scouring: All Walles were replaced in September on Center bee hile outlet. All measures are in place
and functional
6. Have you taken or do you plan to take and corrective actions, as specified in Part 3 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any
Corrective actions identified as a result of this annual comprehensive site inspection?
If YES, how many conditions requiring review for corrective active as specified in Parts 3.1 and 3.2 of the MSGP were addressed by these corrective actions?
Note: Complete the attached Corrective Action Form (Section IV) for each condition indentified, including any conditions identified as a result of this comprehensive storm water inspection.

Section III. Industrial Activity Area Specific Findings						
Complete one block for each industrial activity area where pollutants may b	e exposed	to sto	orm water. Copy this page for additional industrial			
activity areas.						
In reviewing each area, you should consider:						
 Industrial materials, residue, or trash that may have or could come into contact with storm water; Leaks or spills from industrial equipment, drums, tanks, and other containers; 						
 Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and 						
 Tracking or blowing of raw, final, or waste material from areas of no expos 						
Industrial Activity Area: Sand Stock file he	5h	00	niemoved			
1. Brief Description:		e				
2. Are any control measures in need of maintenance or repair?	Yes	K	Νο			
3. Have any control measures failed and require replacement?	Yes	X	No			
4. Are any additional/revised control measures necessary in this area?	Yes	8	No			
If YES to any of these three questions, provide a description of the prol	blem: (Any i	neces	ssary corrective actions should be described on the			
attached Corrective Action Form.)						
7						
Industrial Activity Area: Snow Storpge 1. Brief Description: Snow from road system Only when road greas gre fall			1 1 4			
moustine activity area. Show Sterpy C	-		7 daysile Tome!			
1. Brief Description: Snow from road syste	ms P	5,5	stored origine			
Only when road areas are fall	15	;7	+ hauleo in.			
,						
2. Are any control measures in need of maintenance or repair?	Yes	R	No			
3. Have any control measures failed and require replacement?	Yes		No			
4. Are any additional/revised control measures necessary in this area?	Yes		No			
If YES to any of these three questions, provide a description of the prol		1 2				
attached Corrective Action Form.)		10000	soury confective decions should be described on the			
Industrial Activity Area: 1. Brief Description: All walles were replaced in place and functional.	IN Set	Ne	en ber All measures are			
1. Brief Description: All Walles Were represent	-7					
in al anti-						
in place and function of						
5						
2. Are any control measures in need of maintenance or repair?	Yes	Π	No			
3. Have any control measures failed and require replacement?	Yes	H	No			
4. Are any additional/revised control measures necessary in this area?	Yes	H	No			
If YES to any of these three questions, provide a description of the prob						
attached Corrective Action Form.)		.2003	soury confective actions should be described on the			
			1			

MSGP Annual Report (October 2009)

Permit Tracking #_____

Note: Copy this page and attach additional pages as necessary.

Brief Description:				
bier beschption.				
. Are any control measures in need of maintenance or repair?		Yes		No
. Have any control measures failed and require replacement?		Yes		No
4. Are any additional/revised control measures necessary in this area?		Yes		Νο
If YES to any of these three questions, provide a description of the pro attached Corrective Action Form.)	bler	n: (Any r	nec	essary corrective actions should be described on the
attached Corrective Action Form.)				
ndustrial Activity Area:				
. Brief Description:				
		1	-	1
. Are any control measures in need of maintenance or repair?	+	Yes	╘	No
. Have any control measures failed and require replacement?	-	Yes	<u>_</u>	No
Are any additional/revised control measures necessary in this area?		Yes	L	No
If VEC to any of those three questions provide a description of the pr	hlor	m. IAnu	000	accord corrective actions should be described on the
If YES to any of these three questions, provide a description of the pr attached Corrective Action Form.)	obler	m: (Any	nec	cessary corrective actions should be described on the
If YES to any of these three questions, provide a description of the pr attached Corrective Action Form.)	obler	m: (Any	nec	cessary corrective actions should be described on the
	obler	n: (Any	nec	cessary corrective actions should be described on the
	obler	n: (Any	nec	essary corrective actions should be described on the
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	obler	m: (Any	nec	essary corrective actions should be described on the
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attached Corrective Action Form.) ndustrial Activity Area:	obler	n: (Any	nec	essary corrective actions should be described on the
attached Corrective Action Form.) ndustrial Activity Area:	obler	n: (Any	nec	cessary corrective actions should be described on the
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attached Corrective Action Form.) ndustrial Activity Area: L. Brief Description: 2. Are any control measures in need of maintenance or repair?	bler	Yes	nec	No
attached Corrective Action Form.) ndustrial Activity Area: L. Brief Description: 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement?		Yes] No No
attached Corrective Action Form.) ndustrial Activity Area:Brief Description: 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised control measures necessary in this area?		Yes Yes Yes] No No
attached Corrective Action Form.) ndustrial Activity Area: L. Brief Description: 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement?		Yes Yes Yes] No No
attached Corrective Action Form.) ndustrial Activity Area:Brief Description: 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised control measures necessary in this area? If YES to any of these three questions, provide a description of the pr		Yes Yes Yes] No No
attached Corrective Action Form.) ndustrial Activity Area:Brief Description: 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised control measures necessary in this area? If YES to any of these three questions, provide a description of the pr		Yes Yes Yes] No No
attached Corrective Action Form.) ndustrial Activity Area:Brief Description: 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised control measures necessary in this area? If YES to any of these three questions, provide a description of the pr		Yes Yes Yes] No No
attached Corrective Action Form.) ndustrial Activity Area:Brief Description: 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised control measures necessary in this area? If YES to any of these three questions, provide a description of the pr		Yes Yes Yes] No No

Section IV. Corrective Actions
Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy
this page for additional corrective actions or reviews. Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems
identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your
previous annual report.
1. Corrective Action # 1 of 2 for this reporting period.
2. Is this corrective action:
An update on a corrective action from a previous annual report; or
A new corrective action?
3. Identify the condition(s) triggering the need for this review:
Unauthorized release of discharge
Numeric effluent limitation exceedance
Control measures inadequate to meet applicable water quality standards
Control measures inadequate to meet non-numeric effluent limitations
Control measures not properly operated or maintained
Change in facility operations necessitated change in control measures
Average benchmark value exceedance
 Average benchman value exceedance Other (describe): normal verails of existing measures A. Briefly describe the nature of the problem identified: 4. Briefly describe the nature of the problem identified: Wallte replaced in September, all measures are in place and functioning
4. Briefly describe the nature of the problem identified:
Nottle replaced in September, all measures are in place
IN TINO
and functioning
5. Date problem identified: 9-18
6. How problem was identified:
Comprehensive site inspection
Quarterly visual assessment
Routine facility inspection
Benchmark monitoring
Notification by EPA or ADEC
Other (describe):
7. Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analyses to be conducted, etc.) or if no modification are needed, basis for that determination:
8. Did/will this corrective action require modification of you SWPPP?
9. Date corrective action initiated:
10. Date corrective action completed: $9 - 18$ Or expected to be completed:
11. If corrective action not yet completed, provide the status of the corrective action as the time of the comprehensive site inspections and
describe any remaining steps (including timeframes associated with each step) necessary to complete the corrective action:

Section V. Annual Report Certification **Compliance** Certification Do you certify that your annual inspection has met the requirements of Part 4.2 of the permit, and that, based upon Yes the results of this inspection, to the best of your knowledge, you are in compliance with the permit? No If No, summarize why you are not in compliance with the permit: Annual Report Certification I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Title: SWPP4 Name of Authorized Representative: Hanley inspector lim Date Signed: 10-15-18 Email: timothy hanley & alaska.gov Signature: