



CITY OF ENCINITAS

INSPECTION REPORT

GEOPACIFICA

Storm Water Quality Inspection for Construction Activities

505 South Vulcan Avenue, Encinitas, CA 92024 ♦ 760-633-2770 ♦ FAX 760-633-2818 ♦ TDD 760-633-2700

1/11/13 ✓
cm

Property Address: 425 Santa Fe

Inspection Date: 1/10/13

Contact Person: Larry

Permit No: _____

Phone Number: (714) 553-2851

Project Size: 43 ac.

Site Status: Active Inactive First Inspection Final Sign-Off Date / /

Inspection Frequency: Bi-Weekly Monthly Bi-Annual Post Rain Event Complaint Assessment

State Construction General Permit? Yes No No No No

Is Project SWPPP on Site? Yes No No No No

Qualified SWPPP Practitioner (QSP) Name: _____ Phone Number: _____

MINIMUM BEST MANAGEMENT PRACTICE (BMP) REQUIREMENTS		BMP INSTALLATION REQUIRED	BMP REQUIRES MAINTENANCE	OTHER CORRECTIVE ACTIONS REQUIRED
A. Erosion Control BMPs				
1	Slope / Soil Stabilization		✓	
2	Silt Fencing			
3	Check Dams / Rip Rap		✓	
4	Fiber Rolls		✓	Kept in
5	Permanent Landscaping			
6	Preserving Existing Vegetation			
7	Diversion Channel for Run-On			
8	Other:			
B. Sediment Control BMPs				
1	Storm Drain Inlet Protection			
2	Detention Basin / Desilting Basin			
3	Perimeter Protection			
4	Stabilized Construction Entrance / Exit			
5	Other:			
C. Materials Management BMPs				
1	Stockpile Management			
2	Material Washout Area			
3	Equipment Storage			
4	Trash, Litter, Debris Management			
5	Designated Washout Area(s)			
6	Sanitary Waste Area Management			
7	Fuel / Chemical Storage			
8	Other:			

Corrective Actions: Correct Work (See Comments) No Corrective Actions Required

Referred to the Clean Water Program Stop Work/NOV

Comments: 1) See item #2 Email 12/28/12 by MCE PSD
2) Check dams @ outlets at dog park
3) Fiber Rolls slope adj. Sunset.

Corrective Actions identified above must be addressed, to the satisfaction of the City Inspector, within _____ days from the date above OR prior to the next predicted rain event. Failure to comply by this date may result in further enforcement action by the City of Encinitas.

Inspector (Signature) B. Oliver Date 1/10/13

Received By (Signature) _____ Date / /