



PROJECT NAME AND SITE ADDRESS:	CONTRACT NUMBER:
	ORACLE NUMBER:
	WDID NUMBER:
CONTRACTOR NAME AND ADDRESS:	PROJECT SITE RISK LEVEL:
	<input type="checkbox"/> Risk Level 1 <input type="checkbox"/> LUP Type 1
	<input type="checkbox"/> Risk Level 2 <input type="checkbox"/> WPCP <input type="checkbox"/> LUP Type 2
	<input type="checkbox"/> Risk Level 3 <input type="checkbox"/> LUP Type 3
Submitted by (Print Name and Sign):	
Date:	

Stormwater Training Record

Training Course Title or Specific Training Objective	Location	Date of Training
Stormwater Topics <input type="checkbox"/> Temporary soil stabilization <input type="checkbox"/> Tracking controls <input type="checkbox"/> Non-stormwater management <input type="checkbox"/> Waste management and materials pollution control <input type="checkbox"/> Spill prevention and control <input type="checkbox"/> BMPs required for work activities current week <input type="checkbox"/> Stormwater pollution prevention plan <input type="checkbox"/> Water pollution control program <input type="checkbox"/> Temporary sediment control <input type="checkbox"/> Wind erosion control <input type="checkbox"/> Stormwater discharge sampling <input type="checkbox"/> Other Stormwater Topic _____	Instructor Name	Type of Training <input type="checkbox"/> Formal <input type="checkbox"/> Informal
	Instructor Title	
	Phone	Training Audience <input type="checkbox"/> General <input type="checkbox"/> BMPs <input type="checkbox"/> SWPPP
	Course Length (hours)	

Attendee Roster

Name	Company	Phone

Review and Record Keeping

Has training information been entered into the Stormwater Training Log (CE 2031)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I have reviewed this document and, based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, to the best of my knowledge and belief the information submitted is true, accurate and complete.	
Water Pollution Control Manager (Name)	Date
Water Pollution Control Manager (Signature)	
Received by Resident Engineer (Name)	Date
Resident Engineer (Signature)	



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INSTRUCTIONS

GENERAL INFORMATION

- Projects with a Stormwater Pollution Prevention Plan (SWPPP) or Water Pollution Control Program require the information on this form to document stormwater training for contractor and subcontractor managers, supervisors, and employees. Include the form and require training documentation in the stormwater annual report for SWPPP projects.
- Use this form to document training for employees responsible for activities associated with Construction General Permit compliance and contract specifications. Use this form to document required weekly informal stormwater training.
- Provide this training record and an updated copy of CE-2031, "Stormwater Training Log," to the Resident Engineer within five (5) days of the date of training.
- Attach additional copies of page 1 of this form if necessary to record all attendees attending training.

FORM

- **WDID Number**
For projects with Water Pollution Control Program, enter "WPCP."
- **Attendee Roster**
Enter employee name, contractor or subcontractor company name and employee phone number.
- **Training Audience**
Enter one of the following responses:
General – Training for individuals responsible for activities associated with compliance with the Construction General Permit.
BMPs – Training for individuals responsible for BMP installation, inspection, maintenance, and repair.
SWPPP – Training for individuals responsible for overseeing revising and amending the SWPPP.