

| PROJECT NAME AND SITE ADDRESS: |      |            |                     | CONTRACT NUMBER:         |              |               |
|--------------------------------|------|------------|---------------------|--------------------------|--------------|---------------|
|                                |      |            | -                   | ORACLE NUMBER:           |              |               |
|                                |      |            | _                   | WOID NUMBER              |              |               |
|                                |      |            |                     | WDID NUMBER:             |              |               |
| CONTRACTOR NAME AND ADDRESS:   |      |            |                     | PROJECT SITE RISK LEVEL: |              |               |
|                                |      |            |                     | ☐ Risk Level 1           | LUP Type 1   |               |
|                                |      |            |                     | ☐ Risk Level 2           | LUP Type 2   |               |
|                                |      |            |                     | ☐ Risk Level 3           | ☐ LUP Type 3 |               |
|                                |      |            | Amendments Lo       | og                       |              |               |
| Amendment<br>Number            | Date | Brief Desc | ription of Amendmer | nt                       | Requested by | Approval Date |
|                                |      |            |                     |                          |              |               |
|                                |      |            |                     |                          |              |               |
|                                |      |            |                     |                          |              |               |
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|--|---|--|--|--|--|--|
|  | ORACLE NUMBER:                            |  |  |  |  |  |
|  | WDID NUMBER:                              |  |  |  |  |  |
| Stormwater Pollution Prevention Plan (SWPPP)   |   |  |  |  |  |  |
| Contractor Water Pollution Control Manager (Signature)   | Date                                      |  |  |  |  |  |
| Contractor Water Pollution Control Manager (Name)  | Phone Number                              |  |  |  |  |  |
| QSD (Signature)  | Date                                      |  |  |  |  |  |
| QSD (Name)   | Phone Number                              |  |  |  |  |  |
| Contractor Certification of SWPPP Amendment  |   |  |  |  |  |  |
| I certify under penalty of law that this document and all attachments were prepared under my direction or supervision according to a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or persons directly responsible for gathering the information, the information submitted, to the best of my knowledge and belief, is true, accurate, and complete. I am aware that significant penalties exist for submitting false information, including the possibility of fine and imprisonment for knowing violations.       |   |  |  |  |  |  |
| Contractor (Signature)   | Date                                      |  |  |  |  |  |
| Contractor (Name)  | Phone Number                              |  |  |  |  |  |
| Resident Engineer Acceptance and Approval of SWPPP Amendment   |   |  |  |  |  |  |
| 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 ensure that a qualified personnel property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system of those directly responsible for gathering the information, the information submitted, to the best of my knowledge and belief, is true, accurate, and complete. I am aware that significant penalties exist for submitting false information, including the possibility of fine and imprisonment for knowing violations. |   |  |  |  |  |  |
| Resident Engineer (Signature)  | Date of Amendment Approval and Acceptance |  |  |  |  |  |
| Resident Engineer (Name)   | Phone Number                              |  |  |  |  |  |

## Instructions

## **GENERAL INFORMATION**

- Projects with a Stormwater Pollution Prevention Plan (SWPPP) require the information on this form to document amendments.
- Attach a completed copy of the form to each approved SWPPP amendment, and include in SWPPP Attachment.

## **FORM**

When the resident engineer has approved SWPPP amendments, enter:

- 1. The amendment number.
- 2. The date.
- 3. A brief description of the amendment.
- 4. The name and title of person who requested the amendment.
- 5. The date the resident engineer approved it.