)60 Page 1 of 4

PROJECT NAME AND SITE ADDRESS:		CC	CONTRACT NUMBER:			
		OF	ORACLE NUMBER:			
		WDID NUMBER:				
CONTRACTOR NAME AND ADDRESS:			PROJECT SITE RISK LEVEL: Risk Level 1 Risk Level 2 Risk Level 3		☐ LUP Type 1 ☐ LUP Type 2 ☐ LUP Type 3	□WPCP
	NOTICE OF DISCHARGE GEN	ERAL	INFORMATIO	N		
Discharge Location	Discharge Type	Discharge Type		Sampling		
Description of location:	☐ Stormwater	☐ Stormwater		☐ Yes ☐ No		
	☐ Non-stormwater			If YES, check v	which parameters:	
	☐ Other			☐ Turbidity		
Latitude:			□pH			
Longitude:				☐ Other		
	DISCHARGE OR SPILL I	IDEN	TIFIED BY	<u> </u>		
Name:			Title:			
Organization or Agency:			Phone Number:			
PRELIMINARY NOTIFICATIONS	DATE	DATE		TIME		
Discharge Discovered:						
Water Pollution Control Manager Notified:						
Resident Engineer Notified:						
Corresponding Reports	I					
Attach the following reports:						
Form CE 2053 "Storm Event & Non-Stormy		g was	performed			
Form CE 2064 "Dewatering Operations Sal	npling Report," if applicable					

Page 2 of 4

PROJECT NAME AND SITE ADDRESS:	CONTRACT NUMBER:			
	ODAQUE AUIMPED			
	ORACLE NUMBER:			
	WDID NUMBER:			
	WOID NOMBER.			
	<u> </u>			
NOTICE OF DISCHARGE INFORMATION				
Describe the constituent, source, and cause of the discharge.				
Estimated volume of the discharge.				
Estimated duration of the discharge.				
Construction activities taking place.				
5. Describe the existing best management practices at the discharge location.				
5. Describe the existing best management practices at the discharge location.				
6. Was the discharge eliminated?				
7. Describe the corrective actions taken.				
8. Are further corrective actions planned? Yes No	otivo Actiona Summani"			
If YES, also submit Form CE 2022 "Stormwater Site Inspection Report Corre	ctive Actions Summary			
9. Is a SWPPP/WPCP amendment needed? ☐ Yes ☐ No				

Page 3 of 4

DDO IFOT NAME AND CITE ADDDECO.	CON	TDACT NILIMBED.			
PROJECT NAME AND SITE ADDRESS:		CONTRACT NUMBER:			
	OBA	CLE NUMBER:			
	OKA	CLE NOWIDER.			
	14/5/5				
	WDIL	NUMBER:			
Method of Blockerse Bone	4 04	(f)4!			
Notice of Discharge Repo					
I certify under penalty of law that this Stormwater Site Inspection Report Summary was prepar summary was gathered and evaluated by qualified personnel prior to submittal. Based on my information, the information submitted is, to the best of my knowledge and belief, true, accurate, I am aware that Section 309 (c)(4) of the Clean Water Act (CWA) provides for significant personnel representation or certification.	review and co	of the information and inquiry of thomposters.	se who gathered and evaluated the		
statement, representation, or certification.		Date			
Water Pollution Control Manager Name:		Date			
Water Pollution Control Manager Signature:					
I certify under penalty of law that this Stormwater Site Inspection Report Summary was prepared by me or under my direction or supervision. The information contained in the summary was gathered and evaluated by qualified personnel prior to submittal. Based on my review of the information and inquiry of those who gathered and evaluated the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that Section 309 (c)(4) of the Clean Water Act (CWA) provides for significant penalties, including fines and imprisonment for knowingly submitting false material statement, representation, or certification.					
Resident Engineer Name:		Date			
Resident Engineer Signature:					
Notice of Discharge Reporting					
Discharge reported by telephone or email to the Watershed Protection Program (WF	PP)	Date of discharge reported to	Resident engineer initials		
or Department Point of Contact (POC) within 24 hours of discovery?	. ,	RWQCB			
☐ Yes ☐ No					
Notice of Discharge Report submitted to WPP or POC within 24 hours?		Date report submitted to RWQCB	Resident Engineer initials		
☐ Yes ☐ No					

INSTRUCTIONS

GENERAL INFORMATION

- This form is required for compliance with Order Number 2022-0057-DWQ, NPDES Number CAS000002, "National Pollutant Discharge Elimination System (NPDES) General Permit for Stormwater Discharges Associated with Construction and Land Activities".
- This form is to be completed when the contractor, County, State Water Resources Control Board, or Regional Water Quality Control Board (RWQCB) staff, or other agency, determines that untreated stormwater discharges, authorized non-stormwater discharges, or other pollutant discharges have occurred.
- Submit the form within 24 hours after a non-stormwater discharge, or within 48 hours after: (1) the end of a storm event resulting in a discharge, or (2) receiving a written notice or an order from the RWQCB or another regulatory agency.
- Water quality standards are contained in the Statewide Water Quality Control Plan or applicable Regional Water Quality Control Boards (RWQCBs) Basin Plan.
- Sampling guidance is found in Construction Site Monitoring Program Guidance Manual, latest edition.
- Include a copy of the completed form in the project Storm Water Pollution Prevention Plan (SWPPP) files.

Page 4 of 4

OBLIC MOKE.				
PROJECT NAME AND SITE ADDRESS:	CONTRACT NUMBER:			
	ORACLE NUMBER:			
	WDID NUMBER:			
Photographs				
Action No.: Location:	Action No.: Location:			
Action No.: Location:	Action No.: Location:			
Action No.: Location:	Action No.: Location:			