## **Storm Water Inspection**

JOB NUMBER: GX394

**LOCATED AT: 500 SW LONGVIEW RD.** 

LEE'S SUMMIT, MISSOURI

**DATE:** 10/03/2024

**RESULT:** See below

## **NOTIFICATIONS**

**CONTACTED:** RUSTY SHORTEN

SHAWN SCHMALSTIEG

**CONTACT METHOD: EMAIL** 

**INSPECTION COMPLETED BY:** Chuck Stites

chucks@kvco.net

**Kaw Valley Storm Water Site Inspection Form** 

	ilav v	ancy storm	water sitt	C 1113	section roini					
			Gener	al Info	rmation					
Proj	ect Name		MCC	LONG	SVIEW					
Loca	ition	500	SW LONGVIE	W RD	LEE'S SUMMIT	, MISSOURI				
Date	e of Inspection	10/03/2	10/03/2024							
Insp	ector's Name, phone, email	Chuck Stites		913)	687-5616	chucks@kvco.net				
Insp	ector's certification #	687F976C								
	se (e.g., initial grading): #									
	erosion control sheet(s) renced (e.g., EC08-EC13)	EROSION CO	ONTROL							
	e of Inspection:	I ⊠Regular/V	Veekly □Re	gular/F	Biweekly □ post-	storm event				
Тур	e or mapeedion.	Zancgular/ v	Weather	<u> </u>		3torm event				
Has t	here been a storm event si	nce the last insp				l No				
	s, provide:		••••			. 1.0				
	m Date(s): Amount of prec		gauge referenc	ed:	STORMWATCH	[				
Wea ⊠Cl	ather at time of this inspection $\Box$ Cloudy $\Box$ Rair		ıdv □r	For F	☐Snowing ☐	Sleet				
	ear □ Cloudy □ Kan her: STORMWATCH	i 🗆 Partiy Ciou	idy 🗀 F	og ∟		Temperature: 70				
	iici. STORWIWATCII					Temperature. 70				
	Erosion Controls Required by the SWPPP and/or Erosion Control Sheets									
	Erosion Controls		Maintenance Required?		Corrective Action I	Needed, Notes, (Helpful Tips)				
	And all nonvived newigeness		•							
	Are all required perimeter controls (such as silt fence,	⊠Yes □No □N/A	□Yes ⊠No							
1	wattles, berms) present and	,								
	installed properly?  Are all disturbed areas,	⊠YES □ No	□Yes ⊠No	_						
	inactive for 14 days or									
2	more, properly stabilized	,								
	(steep slopes 7 days)?	N. DN.								
3	Are all storm drain inlets properly protected?	⊠Yes □No □N/A	□Yes ⊠ No	)						
	Are the exits constructed	⊠Yes □ NO	☐ Yes ⊠No	)						
4	correctly (proper width, length, slope, material? <b>Is</b>	□N/A								
	there track-out onto the									
	street?	□Yes ⊠No								
	Are stockpiles more than 50' from a storm drain?	⊠Yes □No □N/A								
5	Are inactive stockpiles	<b>.</b> ,,,,								
	stabilized and/or BMPs Installed down gradient?		□Yes ⊠ No	)						
	Does the sediment basin	□Yes □ No	□Yes ⊠ No	)						
6	have adequate storage	⊠N/A								
	capacity (3,600 cubic ft. /acre required)?									
	Are all ditch checks present	⊠Yes □ No	□Yes ⊠ No	)						
	and installed or built correctly?	□N/A								
7	Are rock ditch checks	□Yes □ No	□Yes ⊠ No	,						
	faced with small (1" or	⊠n/a								
	less) clean rock?									

	BMPs							
	BMP/activity	Implemented?	Maintenance Required?	Corrective Action Needed, Notes, (Helpful Tips)				
1	Trash/litter from work areas placed in covered container(s)?	⊠Yes □ No □N/A	□Yes ⊠No					
2	Are concrete washouts available, used, marked with a sign, & properly constructed (with liner)?	⊠Yes □No □N/A	□Yes ⊠No					
3	Are spill containment materials (spill kit) readily available for bulk liquids?	⊠Yes □No □N/A						
4	Are potential storm water contaminants stored under cover and away from waterways?	⊠Yes □ No □N/A	□Yes ⊠ No					
5	Are all Porta Potty away from and down gradient of storm water inlets?  Porta Potty anchored?	☐ Yes ☐ No ☐ N/A ☐ Yes ☐ No	☐ Yes ⊠ No					
6	In MO, is a public notification sign installed at entrance? In KS, are NOI and SWPPP kept on site?	⊠Yes □ No □N/A	□Yes ⊠ No					
7	Are equipment fueling, cleaning, & maintenance areas free of spills, leaks?	⊠Yes □No □N/A						
8	Fuel tanks located away from waterways (min. 50') and storm drains? Tanks are double-walled, have secondary containment below, or contained by a berm?	⊠Yes □No □N/A ⊠Yes □No		FUEL IS BROUGHT IN ON SERVICE TRUCK				
9	Non-storm water discharges not allowed by the permit are present?	□Yes ⊠ No						
10	Dewatering being done without a control device (such as a filter bag)?	□Yes ⊠ No	□Yes ⊠ No					
11	other	□Yes □ No □N/A	□Yes □ No					

## **CERTIFICATION STATEMENT**

I certify that this document and all attachments were prepared under my direction. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete.

PRINT Name and Title CHUCK STITES SWPPP INSPECTOR