

Water Pollution Prevention Tracking Information

Municipal Stormwater BMP E.10.a Compliance Form

Water Pollution Control Manager Information

Construction Company: _____
Contractor's License Num.: _____
QSP Num (for SWPPP): _____
Responsible Person: _____
Mailing Address: _____
Office Phone Number: _____
Cell Phone Number: _____
Email Address: _____

Project Information

Project Location: _____

Description of Work: _____

Distance to Nearest Creek or Storm Drain: _____

Area of Disturbance _____

Construction Phase (circle one) Off-Site On-Site

Construction Permit Type (completed by City Staff)

Encroachment Permit Permit Number: _____
 Building Permit Permit Number: _____
 Capital Improvement Plan Spec. Number: _____

Construction Permit Status (completed by City Staff)

Date Permit Issued: _____
Estimated Completion Date: _____

Pollution Prevention Plan Type (completed by City Staff)

SWPPP Approval Date: _____
 WPCP (Included with Plans) Approval Date: _____
 WPCP (Minor) Approval Date: _____