For Agency	Use
------------	-----

Permit	Tracking #:	



Section I. General Information	n				- 1		
Facility Name APDES Permit Tracki			ermit Trackin	ig Number			
Commercial Drive Snow Disposal Site				Not Applicab	le		
Facility Physical Address							
Street		City				State	Zip Code
2941 Commercial Dr			Anchorage			Alaska	99501
Contact Person	Title		Phone		Email		
Eric Hodgson		rintendent	(907) 343		AT 18 CO.		nchorageak.gov
Lead Inspector's Name	Additional Inspect		Additional Insp	ector's Nar	ne	Inspection Date	
Riddick Proveaux	Dustin F	Richmond			4000-01-0-0	1	1/21/2023
Section II. General Inspection							
As part of this comprehensive sources, including areas who if NO, describe why not:					t [√ Yes	No No
Note : Complete Section III of this for					SW/000		-Grand in Continu
parts 2 and 3 below, where pollutar			ecteu unu inc	.iuueu iii y	our Swere	or as newly a	ejineu, in Section ii
Did this inspection identify a identified in your SWPPP? If YES, for each location, descriptions.	any storm water	or non-storm wate	*		ı	Yes	✓ No
measures in place:							81
						×	
*:							

For	Agency	Ilca
1 01	Agency	036

Did this inspection identify any sources of storm water or non-storm water discharges not Yes No previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place: Did you review storm water monitoring data as part of this NA, no monitoring 1 Yes No performed inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review: Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring: Snow and ice was present at the time of the inspection. All outfalls and on-site drainage system was frozen over at time of this inspection. Prior to these winter conditions a routine inspection was performed. The inspection showed that there was no evidence of pollutants entering the drainage system and all control measures were functioning per SWPPP plans and designs. 6. Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions? Note: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of this comprehensive storm water inspection.

mit Tracking #	

Section III. Industrial Activity Area Specific Findings				
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional industrial activity areas.				
In reviewing each area, you should consider: • Industrial materials, residue, or trash that may have or could come into contact with storm water;				
 Leaks or spills from industrial equipment, drums, tanks, and other containers; 				
Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and				
 Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas. 				
Industrial Activity Area: RAP Access Roads				
1. Brief Description:				
Heavy equipment navigates on the RAP access roads. Snow and ice	WOC I	orocont	on cit	at this
	was p	JIESEIIL	OH SIR	at tills
time.				
RAP access road #1 has been cleared and maintained for access to the			-	ad.
Access road #2 has not been cleared or maintained, at this time it is no	ot acc	essible		
Are any control measures in need of maintenance or repair?		Yes		No
2. Are any control measures in need of maintenance of repair:	ш	162	lacksquare	NO
3. Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary	correct	tive actions	should b	e described on
the attached Corrective Action Form.)				1
			40	.000
Industrial Activity Area: Snow Disposal Pad				
1. Brief Description:				
Snow Disposal Pad has heavy equipment traveling across it frequently	in or	der to s	tockni	le snow
Snow and ice was present on pad due to freezing conditions. The sn				
cleared of heavy snow, allowing access to the pad. Stockpiling of sno		eing co	rrectly	
sequence and stored at Storage area #1 per SWPPP plans and design	ns.		*	
· · · · · · · · · · · · · · · · · · ·				
Are any control measures in need of maintenance or repair?		Voc		No
2. Are any control measures in need of maintenance of repair?	Ш	Yes	lacksquare	No
Have any control measures failed and require replacement?		Yes		No
3. Have any control measures failed and require replacement:	Ш.	163	V	NO
4. Are any additional/revised control measures necessary in this area?		Yes		No
	ш		<u> </u>	
If YES, to any of these three questions, provide a description of the problem: (Any necessary	correct	tive actions	should b	e described on
the attached Corrective Action Form.)				
a. a.				

Industrial Activity Area: Vac Truck Disposal Area				
1. Brief Description:				
Freezing conditions were present at time of this inspection. Vac trucks and heavy equipment utilize and work in this area during summer and spring time operations. During the winter time this area is traveled across by heavy equipment. All stockpile material and debris has been removed since most recent routine inspection. There are no evidence of pollutants.				
2. Are any control measures in need of maintenance or repair?				
3. Have any control measures failed and require replacement? Yes V				
4. Are any additional/revised control measures necessary in this area? Yes No				
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)				
Industrial Activity Area: Street Sweeper Waste Area				
1. Brief Description:				
Freezing conditions with snow and ice were present at time of this inspection. Street Sweeper and heavy equipment work in this area during summer and spring time operations. During the winter time this area is traveled across by heavy equipment. All street sweeper waste has been removed since most recent routine inspection. There are no evidence of pollutants.				
2. Are any control measures in need of maintenance or repair? Yes V No				
3. Have any control measures failed and require replacement? Yes No				
4. Are any additional/revised control measures necessary in this area? Yes Vo				
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)				

Industrial Activity Area: Equipment Staging Area				
1. Brief Description:				
Snow and ice were present at time of inspection. One dozer was staged on area. The designated Equipment area for staging showed no signs of pollui				
Are any control measures in need of maintenance or repair?	Yes	V	No	
Have any control measures failed and require replacement?	Yes	\checkmark	No	
4. Are any additional/revised control measures necessary in this area?	Yes	\checkmark	No	
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective attached Corrective Action Form.)	tive actions	should b	ne described on	
en e				
Industrial Activity Area: Detention Pond				
Botomion Fond				
1. Brief Description:				
	Prior to	these showe	e winter	
Brief Description: The detention pond receives stormwater and runoff that potentially been expressed from heavy equipment. The pond is currently frozen and covered in snow. conditions a routine inspection was performed under a month ago. The inspection was performed under a month ago.	Prior to	these showe	e winter	
The detention pond receives stormwater and runoff that potentially been exfrom heavy equipment. The pond is currently frozen and covered in snow. conditions a routine inspection was performed under a month ago. The inspection was no evidence of pollutants and is functioning per SWPPP plans are	Prior to pection s and desig	these showe	e winter d that	
The detention pond receives stormwater and runoff that potentially been exfrom heavy equipment. The pond is currently frozen and covered in snow. conditions a routine inspection was performed under a month ago. The inspection was no evidence of pollutants and is functioning per SWPPP plans are 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement?	Prior to pection send designed designed Yes Yes Yes	o these showe ins.	e winter d that No No	
The detention pond receives stormwater and runoff that potentially been exfrom heavy equipment. The pond is currently frozen and covered in snow. conditions a routine inspection was performed under a month ago. The inspection was no evidence of pollutants and is functioning per SWPPP plans are 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement?	Prior to pection send designed designed Yes Yes Yes	o these showe ins.	e winter d that No No	
1. Brief Description: The detention pond receives stormwater and runoff that potentially been exfrom heavy equipment. The pond is currently frozen and covered in snow. conditions a routine inspection was performed under a month ago. The inspection was no evidence of pollutants and is functioning per SWPPP plans are 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary corrections)	Prior to pection send designed designed Yes Yes Yes	o these showe ins.	e winter d that No No	
The detention pond receives stormwater and runoff that potentially been exfrom heavy equipment. The pond is currently frozen and covered in snow. conditions a routine inspection was performed under a month ago. The inspection was no evidence of pollutants and is functioning per SWPPP plans are 2. Are any control measures in need of maintenance or repair? 3. Have any control measures failed and require replacement? 4. Are any additional/revised control measures necessary in this area?	Prior to pection send designed designed Yes Yes Yes	o these showe ins.	e winter d that No No	

	1	Permit Trackin	ng #:	For Agency Us
Industrial Activity Area: Retention Basins				
1. Brief Description:				
Retention basins receives stormwater and run off from Rap access roa pollutants can be exposed from heavy equipment. Basins were covere freezing conditions. Prior to these winter conditions a routine inspection inspection showed that there was no evidence of pollutants and is fundant designs.	d in on wa	snow an	id ice rmed.	due to . The
2. Are any control measures in need of maintenance or repair?		Yes	\checkmark	No
Have any control measures failed and require replacement?		Yes	✓	No
4. Are any additional/revised control measures necessary in this area?		Yes	✓	No
		4) 4)	*	
Industrial Activity Area: Vegetative Conveyance Channel 1. Brief Description: Conveyance Channels receives runoff and stormwater from RAP access and snow pad disposal area. All areas with potential pollutants from he operations. Conveyance channels at time of inspection were covered in these conditions a routine inspection was performed, and no evidence The site BMP's are functioning per SWPPP plans and designs.	eavy n sne	equipme ow and i	ent ar ce. F	nd daily Prior to
2. Are any control measures in need of maintenance or repair?		Yes	√	No
3. Have any control measures failed and require replacement?		Yes	\checkmark	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	correct	ive actions s	should b	ne described on

		T1.1	
•	ermit	Tracking	#:

	Section IV. Corrective Actions					
this	Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.					
	Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to address problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not					
	en completed at the time of your previous annual report.					
1.	Corrective Action # 0 of 0 for this reporting period.					
2.	Is this corrective action:					
	An update on a corrective action from a previous annual report; or					
	A new corrective action?					
3.	Identify the condition(s) triggering the need for this review:					
	Unauthorized release of discharge					
	Numeric effluent limitation exceedance					
	Control measures inadequate to meet applicable water quality standards					
	Control measures inadequate to meet non-numeric effluent limitations					
	Control measures not properly operated or maintained					
	Change in facility operations necessitated change in control measures					
	Average benchmark value exceedance					
	Other (describe):					
4.	Briefly describe the nature of the problem identified:					
5.	5. Date problem identified:					
6.	How problem was identified:					
	Comprehensive site inspection					
	Quarterly visual assessment					
	Routine facility inspection					
*5	Notification by EPA or DEC					
	Other (describe):					
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.					
8.	Did/will this corrective action require modification of your SWPPP?					

		*		
9. Date corrective action initiated:				
10. Date corrective action completed:	Or expected to b	e completed:		
11. If corrective action not yet completed, provid inspections and describe any remaining steps corrective action:				
Section V. Annual Report Certification	_			
Compliance Certification				
Do you certify that your annual inspection has me				
that, based upon the results of this inspection, to	the best of your knowledge, you are	in 🗹 Yes 🗌 No		
compliance with the permit?	20.00			
If NO, summarize why you are not in complian	nce with the permit:			
Municipality of Anchorage Facilities are not regulated under conditions set forth by the Multi-sector permit, but by its MS4 instead.				
Annual Report Certification				
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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.				
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov		
Name of Authorized Representative /	Title	Email		
2 The		12/6/2023		
Signature		Date Signed		

Enr	Agency	11co
U	ARCIICV	USE

	TOT Agency OS
Permit Tracking #:	



Section I. General Information	n							
Facility Name				APDES P	ermit Tracking	Number		
Dowling R	oad Snow Disp	osal Site				, · · · · · · · · · · · · · · · · · · ·		
Facility Physical Address	·							
Street		City				State	Zip Code	
6351 Spruce Stree	et		Anchorage			Alaska	9	9507
Contact Person	Title		Phone		Email			
Eric Hodgson	Supe	rintendent	(907) 343	8-8100	eric.h	nodgson@ai	nchorage	ak.gov
Lead Inspector's Name	Additional Inspect	or's Name	Additional Inspe	ector's Nar	me	Inspection Da	ate	
Riddick Proveaux	Dustin F	Richmond				1	1/21/202	3
Section II. General Inspection	Findings					William State	-	
1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to storm water? If NO, describe why not: Yes No No								
Note : Complete Section III of this for parts 2 and 3 below, where pollutan	m for each indust	rial activity area insp	pected and incl	luded in y	our SWPPP (or as newly de	efined, in S	ection II
2. Did this inspection identify a			er outfalls no	t previou	usly r	¬		
identified in your SWPPP?		*:			L	Yes		О
If YES, for each location, de	escribe the source	es of those storm wa	ter and non-st	orm wate	er discharges	s and any asso	ciated cor	ntrol
measures in place:								

For Agency Use

3.	Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
4.	Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
5.	Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring:
dra rou evi	ow and ice was present at the time the inspection was performed. All outfalls and on-site inage system was frozen over at time of this inspection. Prior to these winter conditions a time inspection was performed recently. The routine inspection showed that there was no dence of pollutants entering the drainage system and all control measures were functioning per I/PPP plans and designs.
3	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions?
Note this	e: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of comprehensive storm water inspection.

Perm	i+ 7	Frac	Lin	~ 4	
GIIII	11	II ac	KIII	K #	

Section III. Industrial Activity Area Specific Findings							
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional indu	ıstrial activity areas.						
In reviewing each area, you should consider:							
 Industrial materials, residue, or trash that may have or could come into contact with storm water; Leaks or spills from industrial equipment, drums, tanks, and other containers; 							
Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and							
 Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas. 							
Industrial Activity Area: RAP Access Roads							
1. Brief Description:							
Heavy equipment directly navigate on the RAP access roads. Snow and ice was pre	sent on site at						
this time. RAP Access Road #1 was not accessible and has not been cleared of sno	W Access						
road #2 has been cleared and maintained. Gate at access road #2 was not locked v	W. ACCESS						
personnal present on site. Cate at access read #4 was alread and a served. Note	viui no						
personnel present on site. Gate at access road #1 was closed and secured. No trac	king or						
pollutants have been observed at this time.	- 3						
2. Are any control measures in need of maintenance or repair?	√ No						
<u> </u>							
3. Have any control measures failed and require replacement? Yes	√ No						
4. Are any additional/revised control measures necessary in this area? Yes	√ No						
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions sh	ould be described on						
the attached Corrective Action Form.)							
	1						
	i						
Industrial Activity Areas C							
Industrial Activity Area: Snow Disposal Pad 1. Brief Description:							
1. Brief Description:							
The Snew Dienocal and main numbers in few annumbers to the state of th	~						
The Snow Disposal pad main purpose is for sequence staging of snow stockpiles. He	eavy						
equipment travels across it regularly in order to stockpile snow. Snow pad has been cleared of							
heavy snow and is being correctly stockpiled at site #1 in the correct stockpile sequence per							
SWPPP plans and designs.							
	~						
2. Are any control measures in need of maintenance or repair?	7						
2. Are any control measures in need of maintenance or repair?	✓ No						
3. Have any control measures failed and require replacement?	Z N						
3. Have any control measures falled and require replacement? Yes	✓ No						
4. Are any additional/revised control measures necessary in this area?	/ No						
	/ No						
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions sho	ould be described on						
the attached Corrective Action Form.)							
	1						
	<i>a</i>						

_		
For	Agency	Use

		Permit Track	ing #:	For Agency U
Industrial Activity Area: Detention Pond				100
1. Brief Description:				
The detention pond receives stormwater and runoff that potentially beefrom heavy equipment. The pond is currently frozen and covered in sno conditions a routine inspection was performed recently. The routine inspection was no evidence of pollutants and is functioning per SWPPP plans and	ow. pect	Prior to	o thes	e winter
2. Are any control measures in need of maintenance or repair?		Yes	√	No
3. Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No
Industrial Activity Area: Street Sweeper Waste Stockpile 1. Brief Description: Freezing conditions with snow and ice were present at time of this inspendency equipment work in this area during summer and spring time operatime this area is traveled across by heavy equipment. There was no street stockpile present at time of inspection. There are no evidence of pollutations. Are any control measures in need of maintenance or repair?	ectio atior	n. Streens. Duri	et Sweing the rwast time.	eeper and e winter e
	ᆜ	Yes	<u></u>	No
Have any control measures failed and require replacement? []		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes		No
If YES, to any of these three questions, provide a description of the problem: (Any necessary continued the attached Corrective Action Form.)	orrecti	ive actions s	should b	e described on

			14	74					
Industrial Activity Area: Rock Lined Conveyance Channel									
1. Brief Description:									
During Spring and Summer time months, potential stormwater pollutants from heavy equipment would flow though this rock lined conveyance channel. At the time of this inspection snow and ice were present, the channel was frozen and covered in snow. The most recent routine inspection pre-winter condition resulted in no signs of pollutants in the channel.									
2. Are any control measures in need of maintenance or repair?		Yes	√	No					
3. Have any control measures failed and require replacement?		Yes	✓	No					
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No					
If YES, to any of these three questions, provide a description of the problem: (Any necessa the attached Corrective Action Form.)	ry correc	tive actio	ns should b	e described on					
				39-					
Industrial Activity Area: Velocity Dissipater Discharge Point #1									
1. Brief Description:									
Velocity Dissipater slows and receives runoff water from Rock lined conveyance channel and snow pad disposal area, where stormwater is exposed to pollutants from heavy equipment and daily operations. Due to winter conditions the Velocity Dissipater was covered in snow and could not visibly be inspected. prior to these conditions a routine inspection was recently performed. The inspection showed that there was no evidence of pollutants entering or leaving the drainage system and all control measures were functioning per SWPPP plans and design.									
2. Are any control measures in need of maintenance or repair?		Yes	√	No					
3. Have any control measures failed and require replacement?		Yes	√	No					
4. Are any additional/revised control measures necessary in this area?		Yes		No					
If YES, to any of these three questions, provide a description of the problem: (Any necessal the attached Corrective Action Form.)	ry correct	ive action	s should b	e described on					

For	Agency	Πca
FUI	Agency	USE

			For Agency Use		
		Permit Tracking #:			
	 	2			
dustrial Activity Area: Settling Pond					

The Settling ponds allows runoff water to settle out that has passed through the Velocity Dissipater which receives water from the Rock lined conveyance channel and snow pad disposal area. The stormwater from this area is exposed to pollutants from heavy equipment and daily operations.

CO	Due to winter conditions the Settling pond was frozen and covered in snow. Prior to these conditions a routine inspection was recently performed. The routine inspection showed that there was no evidence of pollutants entering or leaving this drainage system and all control measures were functioning per SWPPP plans and design.								
2.	Are any control measures in need of maintenance or repair?		Yes	√	No				
3.	Have any control measures failed and require replacement?		Yes	✓	No				
4.	Are any additional/revised control measures necessary in this area?		Yes	/	No				
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	correct	ive actions	should	e described on				
Ind	lustrial Activity Area: Vegetative Buffer Strip								
l .	Brief Description:								
po of pe	The Vegetative Buffer Strip receives runoff water from RAP access roads where it is exposed to pollutants from heavy equipment and daily operations. At the time of the inspection heavy amount of snow covered the buffer strip. Prior to these conditions a routine inspection was recently performed. The routine inspection showed that there was no evidence of pollutants in the buffer area and all control measures were functioning per SWPPP plans and designs.								
2.	Are any control measures in need of maintenance or repair?		Yes	✓	No				
3.	Have any control measures failed and require replacement?		Yes	√	No				
4.	Are any additional/revised control measures necessary in this area?		Yes	√	No				
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	correcti	ve actions s	should b	e described on				

1. Brief Description:

Enr	Aa	ana	/ Use
-OI	MK	GIIC	/ USE

	ection IV. Corrective Actions
thi	mplete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy is page for additional corrective actions or reviews.
Inc	clude both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to
bee	dress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not en completed at the time of your previous annual report.
1.	
2.	Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
	Average benchmark value exceedance
	Other (describe):
4.	Briefly describe the nature of the problem identified:
5.	Date problem identified:
6.	How problem was identified:
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
8.	Did/will this corrective action require modification of your SWPPP? Yes No

For Agency Use

9. Date corrective action initiated:		
10. Date corrective action completed:	Or expected to	be completed:
11. If corrective action not yet completed, proviinspections and describe any remaining step corrective action:	de the status of the corrective action is (including timeframes associated v	n as the time of the comprehensive site with each step) necessary to complete the
Section V. Annual Report Certification		
Compliance Certification		a .
Do you certify that your annual inspection has m	et the requirements of Part 6.3 of th	ne permit, and
that, based upon the results of this inspection, to compliance with the permit?	the best of your knowledge, you ar	re in 🔽 Yes 🗌 No
If NO, summarize why you are not in complia	ance with the permit:	
Municipality of Anchorage Facilities an permit, but by its MS4 instead.	re not regulated under cond	itions set forth by the Multi-sector
Annual Report Certification		
I certify under penalty of law that this documen accordance with a system designed to assure the Based on my inquiry of the person or persons we information submitted is, to the best of my know significant penalties for submitting false information.	at qualified personnel properly gath ho manage the system, or those per wledge and belief, true, accurate, an	er and evaluate the information submitted. son directly responsible for gathering the d complete. I am aware that there are
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov
Name of Authorized Representative	Title	Émail
331		12/6/2023
Signature		Date Signed

For	Age	ncv	Use



Section I. General Information	n						
Facility Name				APDES P	ermit Trackin	g Number	
Kloep Station Ma	aintenance & St	torage Facility					
Facility Physical Address							
Street		City				State	Zip Code
5610 Northwood Dri			Anchorage			Alaska	99502
Contact Person	Title		Phone		Email		
Eric Hodgson		rintendent	(907) 343				nchorageak.gov
Lead Inspector's Name	Additional Inspect		Additional Insp	ector's Nan	ne	Inspection Da	
Riddick Proveaux	Dustin F	Richmond				1	1/21/2023
Section II. General Inspection							
As part of this comprehensive sources, including areas when if NO, describe why not: Output Description: Output Description						√Yes	□ No
Note: Complete Section III of this for parts 2 and 3 below, where pollutan 2. Did this inspection identify a	ts may be expose	d to storm water.					fined, in Section II
identified in your SWPPP?		947			L	Yes	
If YES, for each location, do measures in place:	escribe the source	es of those storm wa	ater and non-st	torm wate	r discharge	s and any asso	ciated control
							-

0				
Perm	IIT I	rac	kıng	#:

 Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
4. Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring:
Snow and Ice was present throughout the site, due to winter conditions. All outfalls, flow
dissipations, and on-site drainage systems were covered in snow or frozen at this time. Prior to the freezing conditions a routine inspection was performed. The routine inspection showed that the outfalls and on-site drainage system were free of any pollutants and no maintenance was required. All BMP's were functioning per SWPPP plans and designs.
6. Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge
under this permit if this is your first annual report), including any corrective actions identified Yes Yes No
as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions?
Note : Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of this comprehensive storm water inspection.

Section III. Industrial Activity Area Specific Findings				
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this In reviewing each area, you should consider:	page for	additional .	industrial	activity areas.
Industrial materials, residue, or trash that may have or could come into contact with storm water;				
 Leaks or spills from industrial equipment, drums, tanks, and other containers; 				
 Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and 				
Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas.				
Industrial Activity Area: Access Roads/ Pavement				
1. Brief Description:				
The access roads and pavement areas are utilized by heavy equipme				
operations. In which being exposed to tracking and potential pollutant				
snow and ice were present on site. All roads and pavement areas we		ared ar	id mai	ntained at
time of inspection. No tracking or pollutants were observed at this tim	e.			-
2. Are any control measures in need of maintenance or repair?		Yes	✓	No
3. Have any control measures failed and require replacement?		Yes	\checkmark	No
4. Are any additional/revised control measures necessary in this area?		Yes	✓	No
If YES, to any of these three questions, provide a description of the problem: (Any necessar	y correc	tive action	should l	be described on
the attached Corrective Action Form.)				
				*
				0
Industrial Activity Area: Vac Truck Disposal Area				
1. Brief Description:				
Vac Truck Disposal Area is series of sedimentation basins with weirs	hat s	tockpile	s debi	ris from
vac trucks. Area is covered in snow and is frozen due to the winter co				
conditions a routine inspection was performed. The inspection showe				
	u ina	trie dis	posai	area was
maintained and functioning per SWPPP plans and designs				
2. Are any control measures in need of maintenance or repair?	П	Yes		No
2. The dry control measures in freed of finance of repair.		103	V	110
3. Have any control measures failed and require replacement?		Yes	\checkmark	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessar	y correc	tive action:	should l	be described on
the attached Corrective Action Form.)				
				- 1

Permit Tra	cking #:
------------	----------

Industrial Activity Area: Materials Storage Areas		
1. Brief Description:		
Material Storage Areas include all storage areas within the facility. A ice was present on site. All storage areas within the site was correct free of any pollutants and debris.		
2. Are any control measures in need of maintenance or repair?	Yes	√ No
3. Have any control measures failed and require replacement?	Yes	√ No
4. Are any additional/revised control measures necessary in this area?	Yes	√ No
If YES, to any of these three questions, provide a description of the problem: (Any necessor the attached Corrective Action Form.)	ary corrective action	ns should be described on
		-
		36 V
Industrial Activity Area: Oil and Grit Separators		
Industrial Activity Area: Oil and Grit Separators 1. Brief Description:		
	ns. Oil and groot be access inspection a	rit separators are ed at time of
1. Brief Description: There are three oil and grit separators within the facility. Each separation pollutants from heavy equipment, vehicles, and daily facility operation located within buildings, All building were secured locked and could reinspection. A prior routine inspection was performed recently. In this	ns. Oil and groot be access inspection a	rit separators are ed at time of
1. Brief Description: There are three oil and grit separators within the facility. Each separation pollutants from heavy equipment, vehicles, and daily facility operation located within buildings, All building were secured locked and could rinspection. A prior routine inspection was performed recently. In this separators were maintained and functioning per SWPPP plans and description.	ns. Oil and groot be access inspection a lesigns	rit separators are ed at time of Il oil and grit
 Brief Description: There are three oil and grit separators within the facility. Each separators pollutants from heavy equipment, vehicles, and daily facility operation located within buildings, All building were secured locked and could reinspection. A prior routine inspection was performed recently. In this separators were maintained and functioning per SWPPP plans and description. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? 	ns. Oil and groot be access inspection a lesigns Yes Yes	rit separators are led at time of ll oil and grit No No No
 Brief Description: There are three oil and grit separators within the facility. Each separators pollutants from heavy equipment, vehicles, and daily facility operation located within buildings, All building were secured locked and could reinspection. A prior routine inspection was performed recently. In this separators were maintained and functioning per SWPPP plans and description. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? 	ns. Oil and groot be access inspection a lesigns Yes Yes	rit separators are led at time of ll oil and grit No No No
 Brief Description: There are three oil and grit separators within the facility. Each separators pollutants from heavy equipment, vehicles, and daily facility operation located within buildings, All building were secured locked and could reinspection. A prior routine inspection was performed recently. In this separators were maintained and functioning per SWPPP plans and description of the problem: (Any necessary in this area? Are any additional/revised control measures necessary in this area? 	ns. Oil and groot be access inspection a lesigns Yes Yes	rit separators are led at time of ll oil and grit No No No

MSGP Annual Report (Oct 2020) Page 4 of 9

Industrial Activity Area: Equipment Storage Areas				
1. Brief Description:				
Equipment Storage areas in including all areas of equipment that is stand ice was present at time of inspection. All equipment areas were laste. No pollutants or debris was present at this time, area is being mand specs.	abele	d correc	ctly wi	thin the
2. Are any control measures in need of maintenance or repair?		Yes	√	No
3. Have any control measures failed and require replacement?		Yes	✓	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessar the attached Corrective Action Form.)	y correct	tive actions	should	be described on
				*
Industrial Activity Area: Faceline Otelline				
Industrial Activity Area: Fueling Station 1. Brief Description:				
Fueling Station provides fuel for diesel and gas municipal vehicles and conditions were present at this time. No spills or leaks were observed			Wint	er
2. Are any control measures in need of maintenance or repair?		Yes	\checkmark	No
3. Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		V		¥.
If YES, to any of these three questions, provide a description of the problem: (Any necessar the attached Corrective Action Form.)		Yes	V	No
the attached corrective Action Form.)	y correct		should	
the attached corrective Action Form.)	y correct		should	
the attached corrective Action Form.)	y correct		should	

MSGP Annual Report (Oct 2020) Page 5 of 9

Industrial Activity Area: Discharge Point #1 (Vehicle Wash Station)			-		
1. Brief Description:					
Discharge Point #1 receives runoff from access road, pavement, and having exposure to pollutants from heavy equipments and vehicle wa discharge point # 1. Prior to the winter conditions, a routine inspection routine inspection observed that the BMP's were free of pollutants an plans and designs.	sh off. n was	Snov	v and i med.	ce cove	ered
2. Are any control measures in need of maintenance or repair?		Yes	√	No	
3. Have any control measures failed and require replacement?		Yes	√	No	
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No	
If YES, to any of these three questions, provide a description of the problem: (Any necessa the attached Corrective Action Form.)	ry correc	tive action	s should	be describe	ed on
		*			
Industrial Activity Area: Discharge point # 4. (inlet)					
1. Brief Description:					
Discharge point #4 is a grate inlet located in a pavement area. It receives has been exposed to potential pollutants from heavy equipment and is frozen and covered in snow due to winter conditions. Prior to these inspection was performed. The routine inspection showed that the inlewas functioning per SWPPP plans and designs.	daily fa	acility o	perational roution	ns. Inl ne	et
2. Are any control measures in need of maintenance or repair?		Yes	√	No -	9
3. Have any control measures failed and require replacement?		Yes	\checkmark	No	
4. Are any additional/revised control measures necessary in this area?		Yes	✓	No	
If YES, to any of these three questions, provide a description of the problem: (Any necessal the attached Corrective Action Form.)	ry correct	tive action	s should l	be describe	ed on

MSGP Annual Report (Oct 2020) Page 6 of 9

Industrial Activity Area: Water Treatment Pond		
1. Brief Description:		
The Water Treatment Pond receives runoff from pavement and dra sedimentation basins. Both areas having exposure to pollutants fr vac truck disposal waste. At time of the inspection pond was froze the winter conditions a routine inspection was performed. This ins and all BMP's were maintained and functioning per SWPPP plans	om either heavy en and covered i pection showed	equipment or n snow. Prior to
2. Are any control measures in need of maintenance or repair?	Yes	√ No
3. Have any control measures failed and require replacement?	Yes	√ No
4. Are any additional/revised control measures necessary in this area?	Yes	√ No
If YES, to any of these three questions, provide a description of the problem: (Any necon the attached Corrective Action Form.)	essary corrective action	s should be described on
		×
	5.	
Industrial Activity Area: D		
Industrial Activity Area: Discharge point #5 Velocity Dissipater 1. Brief Description:		
Discharge point #5 receives and slows down runoff from pavement pavement and roads have exposure to potential pollutants from he Dissipater and discharge point was covered in snow at the time of conditions a routine inspection was performed. The routine inspective of pollutants and was functioning per SWPPP plans and design	avy equipment the inspection for the inspection of the contraction of	The Velocity Prior to these
2. Are any control measures in need of maintenance or repair?	Yes	√ No
3. Have any control measures failed and require replacement?	Yes	√ No
4. Are any additional/revised control measures necessary in this area?	Yes	√ No
If YES, to any of these three questions, provide a description of the problem: (Any nece the attached Corrective Action Form.)	essary corrective action.	s should be described on
		-

MSGP Annual Report (Oct 2020) Page 7 of 9

Coi thi:	ction IV. Corrective Actions mplete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy is page for additional corrective actions or reviews. Is placed both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to
	dress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not en completed at the time of your previous annual report.
1.	Corrective Action # 0 of 0 for this reporting period.
2.	Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
	Average benchmark value exceedance
	Other (describe):
4.	Briefly describe the nature of the problem identified:
5.	Date problem identified:
6.	How problem was identified:
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
8.	Did/will this corrective action require modification of your SWPPP?

9. Date corrective action initiated:	*	90		
10. Date corrective action completed:	Or expected to	be completed:		
11. If corrective action not yet completed, provice inspections and describe any remaining steps corrective action:				
Section V. Annual Report Certification				
Compliance Certification		· · · · · · · · · · · · · · · · · · ·		
Do you certify that your annual inspection has me that, based upon the results of this inspection, to	et the requirements of Part 6.3 of the the best of your knowledge, you are	e permit, and e in		
compliance with the permit?	and all			
If NO, summarize why you are not in complia	nce with the permit:			
Municipality of Anchorage Facilities are not regulated under conditions set forth by the Multi-sector permit, but by its MS4 instead.				
	· · · · · · · · · · · · · · · · · · ·			
Annual Report Certification				
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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.				
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov		
Name of Authorized Representative	Title	Email		
25/		12/4/2023		
Signature		Date Signed		

or	Agency	Use
OI.	ASCIICY	030

Dor	mit '	Frack	ring	#.
1 611	1111	Hacr	MILES	TT.



Section I. General Informatio	n		38000				
Facility Name APDES Permit Tracking Number							
	ion Snow Dispo	osal Site					
Facility Physical Address							
Street		City				State	Zip Code
5600 Northwood Dri			Anchorage			Alaska	99502
Contact Person	Title	data a da at	Phone (007) 040	0400	Email		T. Company of the com
Eric Hodgson Lead Inspector's Name	Additional Inspect	rintendent	(907) 343 Additional Inspe	A STATE OF THE STA			nchorageak.gov
Riddick Proveaux		Richmond	Additional mspe	ector 5 Nan	ile	Inspection Da	1/21/2023
		dominiona					1/21/2023
Section II. General Inspection		a did is a second	- II				
As part of this comprehensive sources, including areas when If NO, describe why not:	re industrial ac	n, did you inspect tivity may be expo	all potential p sed to storm	oollutant water?		√ Yes	No
The state of the s							×4.
Note: Complete Section III of this form for each industrial activity area inspected and included in your SWPPP or as newly defined, in Section II parts 2 and 3 below, where pollutants may be exposed to storm water.							
2. Did this inspection identify a	ny storm water	or non-storm wat	er outfalls no	t previou	ısly [Yes	√ No
identified in your SWPPP?	a a a illa a al-		e energy of the common		L	 .	
If YES, for each location, do measures in place:	escribe the source	es of those storm wa	ter and non-st	orm wate	er discharge	es and any asso	ociated control
measures in place.							
-							
Ø:							-
			4				
-							
*							-
			*1				

	For	Agency	Use
--	-----	--------	-----

	Permit Tracking #:
3.	Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? If YES describe these sources of storm water or non-storm water discharges not Yes No
	If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
4.	Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
	in 163, sufficiency and manages of that review and describe any additional hispection activities resulting from this review.
5	
э.	Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring:
rou pol	nter conditions with snow and ice were present at the time of the inspection. All outfalls, ponds, d on-site drainage system were frozen at time of this inspection. Prior to freezing conditions a utine inspection was performed. The routine inspection showed that there was no evidence of llutants entering or leaving the drainage system and all control measures were functioning per VPPP plans and designs.
6.	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge
	under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions?
	e: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of comprehensive storm water inspection.

MSGP Annual Report (Oct 2020)

Permit	Track	ing	#:
--------	-------	-----	----

Section III. Industrial Activity Area Specific Findings				
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy th	is page fo	r additional in	dustrial	activity areas.
In reviewing each area, you should consider:				
 Industrial materials, residue, or trash that may have or could come into contact with storm water; 				
Leaks or spills from industrial equipment, drums, tanks, and other containers;				
Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and				
Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas.				
Industrial Activity Area: RAP Access Roads				
1. Brief Description:				
RAP Access Roads directly are utilized by heavy equipment during fa	oilita	norotion	۸ ۸	t this time
winter and the same was a state of the same and the same	Cility C	pperauor	15. A	t triis time
winter conditions are present with heavy amounts of snow and ice on	the si	te. RAP	acce	ess road #1
is being utilized and has been cleared of snow. RAP access road #2	is cov	ered in s	snow	and is not
accessible as of right now, gate at access road #2 is closed and secu	red I	Vo tracki	na or	nollutante
have been observed at either access road at this time.	icu. i	NO LIACKI	ng o	polititarits
nave been observed at either access road at this time.				
2. Are any control measures in need of maintenance or repair?		Yes		No
3. Have any control measures failed and require replacement?	П	Yes	V	No
			ب	
4. Are any additional/revised control measures necessary in this area?		Yes	1	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary	ry correc	tive actions	should i	be described on
the attached Corrective Action Form.)				
				No.
Industrial Activity Area: O B: LB L				
Industrial Activity Area: Snow Disposal Pad				
1. Brief Description:				
				: 0.
The Snow Disposal pad area is for staging of snow stockpiles per seq	uence	in SWF	PP r	lans
Heavy equipment travels across it regularly in order to stockpile snow				
of begins and the begins across it regularly in order to stockpile snow	. 3110	w pau n	as be	en deared
of heavy snow and is being correctly stockpiled at site #1 in the correct	ct stoc	kpile se	quen	ce per
SWPPP plans and designs. No pollutants have been observed at this	s time.			
				vx.
*				
2. Are any control measures in need of maintenance or repair?		Yes		No
3. Have any control measures failed and require replacement?		Yes	1	No
			<u> </u>	110
4. Are any additional/revised control measures necessary in this area?		Yes		Na
			V	No
If YES, to any of these three questions, provide a description of the problem: (Any necessar	y correct	ive actions s	should b	e described on
the attached Corrective Action Form.)				
				l
27				

For	Agong	Hea
FOF	Agency	use

	ı	Permit Track	ing #:	For Agency Us
Industrial Activity Area: Vegetative Buffer Discharge Point #2				
Brief Description:				
The Vegetative Buffer Discharge Point receives runoff from the snow partial has exposure to pollutants from heavy equipment and snow melt contain present at time of inspection. Prior to the winter conditions a routine instance of provided that there was no evidence of pollutants and all per SWPPP plans and designs.	mina spec	ants. Sration was	now ar	nd ice was ormed.
2. Are any control measures in need of maintenance or repair?		Yes	\checkmark	No
Have any control measures failed and require replacement?		Yes	✓	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary of the attached Corrective Action Form.)	correct	ive actions	should b	e described on
Industrial Activity Area: Staging Area				
Brief Description:				
This includes both staging areas. At the time of this inspection winter coequipment was present on-site. No pollutants were observed where the				
2. Are any control measures in need of maintenance or repair?		Yes	√	No
3. Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary of the attached Corrective Action Form.)	orrect	ive actions	should b	e described on

or	Agency	l lca

Industrial Activity Area: Conveyance Channel								
1. Brief Description:								
The Conveyance Channel receives runoff from RAP access roads and Snow Disposal pads. This runoff has been exposed to potential pollutants from Heavy equipment and facility operations. At this time the Channel has snow on it and is frozen due to winter conditions. Prior to the freezing conditions a routine inspection was performed. The routine inspection provided that the channel was free of pollutants and BMP's were functioning per SWPPP plans and designs.								
2. Are any control measures in need of maintenance or repair?		Yes	√	No				
3. Have any control measures failed and require replacement?		Yes	\checkmark	No				
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No				
If YES, to any of these three questions, provide a description of the problem: (Any necessa the attached Corrective Action Form.)	ry correct	tive actions	s should b	e described on				
e e e e e e	4		*	9				
Industrial Activity Area: Vegetative Buffer Discharge Point #1								
1. Brief Description:								
Vegetative Buffer Discharge Point # 1 receives runoff from RAP access roads, Staging areas, and Snow disposal pad. The runoff from these areas have been exposed to potential pollutants from heavy equipment and stockpiles from daily facility operations. The buffer and discharge point is covered in snow and ice due to winter conditions. A routine inspection was performed prior to these conditions. The routine inspection showed that the discharge point and vegetative buffer strip was free of pollutants and that the BMP's were functioning per SWPPP plans and designs.								
2. Are any control measures in need of maintenance or repair?		Yes	✓	No				
3. Have any control measures failed and require replacement?		Yes	✓	No				
4. Are any additional/revised control measures necessary in this area?		Yes		No				
If YES, to any of these three questions, provide a description of the problem: (Any necessal the attached Corrective Action Form.)	ry correct	ive actions	should b	e described on				

MSGP Annual Report (Oct 2020) Page 5 of 8

				-			
In	dustrial Activity Area: Vegetative Buffer Discharge Point #2						
1.	Brief Description:						
Vegetative Buffer Dischrage point #2 receives runoff from Snow Disposal pad and drainage zone #3. Th runoff from from these two areas are exposed to potential pollutants from heavy equipment and daily facility operations. The discharge point and Vegetative Buffer is covered in snow and ice at this time. A rountine inpsection was performed prior to the freezing conditions. The inspection provided that Discharge point #2 and the Vegetative Buffer was free of pollutants and that the BMP's were functioning per SWPPP plans and designs.							
2.	Are any control measures in need of maintenance or repair?		Yes	√	No		
3.	Have any control measures failed and require replacement?		Yes	√	No		
4.	Are any additional/revised control measures necessary in this area?		Yes	✓	No		
	If YES, to any of these three questions, provide a description of the problem: (Any necessa the attached Corrective Action Form.)	ry correc	tive action	s should	be described on		
Inc	dustrial Activity Area: Street Sweeper Waste Stockpile						
	Brief Description:						
an eq	reet Sweeper Waste Stockpile area has heavy equipment working in dispring time operations. During the Winter time this area is traveled uipment. Area has snow and ice on it due to winter conditions. All the removed since most recent routine inspection. Area was free of	ed acre I stree	oss by t swee _l	heavy ber wa	ste has		
2.	Are any control measures in need of maintenance or repair?		Yes	✓	No		
3.	Have any control measures failed and require replacement?		Yes	✓	No		
4.	Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No		
	If YES, to any of these three questions, provide a description of the problem: (Any necessal the attached Corrective Action Form.)	y correct	ive action:	s should l	oe described on		
2.0							
ine.							

Permit Tracking	Pe	rm	it '	Tra	ack	in	g	#:
-----------------	----	----	------	-----	-----	----	---	----

this	ction IV. Corrective Actions mplete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy is page for additional corrective actions or reviews. Itude both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to dress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not encompleted at the time of your previous annual report.
1.	Corrective Action # 0 of 0 for this reporting period.
2.	Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
100	Average benchmark value exceedance
	Other (describe):
4.	Briefly describe the nature of the problem identified:
5.	Date problem identified:
6.	How problem was identified:
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
8.	Did/will this corrective action require modification of your SWPPP?

9. Date corrective action initiated:					
10. Date corrective action completed:	Or expected to	be completed:			
11. If corrective action not yet completed, prinspections and describe any remaining scorrective action:	rovide the status of the corrective action steps (including timeframes associated steps)	n as the time of the comprehensive site with each step) necessary to complete the			
Section V. Annual Report Certification					
Compliance Certification					
Do you certify that your annual inspection ha	s met the requirements of Part 6.3 of the	he permit, and			
that, based upon the results of this inspection	n, to the best of your knowledge, you a	re in 🗸 Yes 🗌 No			
compliance with the permit?					
If NO, summarize why you are not in con	npliance with the permit:				
Municipality of Anchorage Facilities are not regulated under conditions set forth by the Multi-sector permit, but by its MS4 instead.					
Annual Report Certification					
I certify under penalty of law that this document accordance with a system designed to assume Based on my inquiry of the person or person information submitted is, to the best of my lesignificant penalties for submitting false information.	e that qualified personnel properly gath ns who manage the system, or those pe knowledge and belief, true, accurate, a	her and evaluate the information submitted. erson directly responsible for gathering the nd complete. I am aware that there are			
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov			
Name of Authorized Representative	Title	Email			
500		12/6/2023			
Signature		Date Signed			

or Agency Use

Permit	Track	ing #:
--------	-------	--------



Section I. General Information	n							
Facility Name				APDES Pe	ermit Trackin	g Number		
Muldoon Mai	ntenance/Stora	ge Facility				Not Applica	ble	
Facility Physical Address								
Street		City				State	Zip Code	
7909 Boundary Aver			Anchorage			Alaska	9950	4
Contact Person	Title		Phone	2400	Email			
Eric Hodgson Lead Inspector's Name		rintendent	(907) 343				nchorageak.g	jov
Riddick Proveaux	Additional Inspect	Richmond	Additional Insp	ector's Nan	ne	Inspection D		
		Richmond					11/28/2023	
Section II. General Inspection								
As part of this comprehensive sources, including areas when the left NO, describe why not:						√ Yes	No	
		*					*0	ø
Mater Complete Section III of this for			_					
Note : Complete Section III of this for parts 2 and 3 below, where pollutant	m jor each inaust ts may be exposed	riai activity area inst d to storm water.	pectea ana inc	iuaea in y	our SWPPP	or as newly d	efined, in Sectio	on II
Did this inspection identify a identified in your SWPPP? If YES, for each location, do measures in place:	ny storm water	or non-storm wate		(146)	L	Yes	No ociated control	
measures in place.								
-								

Eor	Agency	Hec
I UI	Agency	036

3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any
control measures in place:
4. Did you review storm water monitoring data as part of this Yes No. NA, no monitoring
inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
 Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and
around outfalls, including flow dissipation measure to prevent scouring:
At the time of the inspection snow and ice was present throughout the site due to winter conditions.
All outfalls and on-site drainage systems are frozen and covered in snow. Prior to the freezing
conditions, a routine inspection was performed. The routine inspection showed that there was no
evidence of pollutants entering the drainage system and all BMP's were functioning per SWPPP plans and designs.
promote and allocagnes
6. Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit,
since your last annual report submission (or since you received authorization to discharge
under this permit if this is your first annual report), including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including any corrective actions identified Including action Including act
If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP
were addressed by these corrective actions? Note: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of

Permit	Tracking	#:
--------	----------	----

Section III. Industrial Activity Area Specific Findings
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional industrial activity areas. In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with storm water;
 Leaks or spills from industrial equipment, drums, tanks, and other containers; Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and
Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas.
Industrial Activity Area: RAP Access Road/ Pavement
1. Brief Description:
The RAP Access Road and pavement recieves runoff from heavy equipment operations and storage stockpiles. Snow and ice was present though out the site at time of the inspection. Majority of the RAP and pavement has been cleared of heavy snow and showed no evidence of pollutants.
2. Are any control measures in need of maintenance or repair?
3. Have any control measures failed and require replacement? Yes No
4. Are any additional/revised control measures necessary in this area? Yes No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described or
Industrial Activity Area: Equipment/Material Storage Areas 1. Brief Description:
All Equipment and Material Storage areas though out the site were stored correctly per SWPPP plans and designs. Snow and ice covered the site due to winter conditions. Prior to this conditions a routine inspection was performed. The routine inspection showed that there the storage areas were free of pollutants and debris.
2. Are any control measures in need of maintenance or repair? Yes No
3. Have any control measures failed and require replacement? Yes Vo
4. Are any additional/revised control measures necessary in this area? Yes Vo
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)

Permit	Tracking #:	

Industrial Activity Area: Vegetated Conveyance Channel										
1. Brief Description:										
The Vegetated Conveyance Channel receives runoff from storage areas and pavement area. The runoff from both areas are exposed to potential pollutants from heavy equipment and facility storage. Snow and ice covered all of the Vegetated Conveyance Channel, due to winter conditions. Prior to these conditions, a routine inspection was performed. The routine inspection showed that Conveyance Channel was free of pollutants and was functioning per SWPPP plans and details.										
2. Are any control measures in need of maintenance or repair?		Yes	√	No						
3. Have any control measures failed and require replacement?		Yes	\checkmark	No						
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No						
If YES, to any of these three questions, provide a description of the problem: (Any necess the attached Corrective Action Form.)	sary correct	tive action	ns should i	be described on						
*										
	10 × 1			£i						
Industrial Activity Area: Defending Decimal										
Industrial Activity Area: Retention Basin 1. Brief Description:										
1. Brief Description:										
The Retention Basin receives runoff from the Vegetated Conveyance area. Both areas were runoff is exposed to potential pollutants from operations. At time of the inspection snow and ice covered the entire conditions. Prior to these conditions a routine inspection was performed that the Retention Basin was free of pollutants and was fur designs.	heavy e Reter rmed.	equipm ition Ba The ro	nent ar asin du utine ir	nd facility le to winter aspection						
2. Are any control measures in need of maintenance or repair?		Yes	√	No						
3. Have any control measures failed and require replacement?		Yes	√	No						
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No						
If YES, to any of these three questions, provide a description of the problem: (Any necess the attached Corrective Action Form.)	sary correct	ive action	s should b	e described on						
				-						

5

		ı	Permit Tracki	ng #:		-
Inc	dustrial Activity Area:					
1.	Brief Description:					
2.	Are any control measures in need of maintenance or repair?		Yes		No	
3.	Have any control measures failed and require replacement?		Yes		No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
-5	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	correct	tive actions	should	be descr	ibed on
				ing.		*
	dustrial Activity Area:					
1.	Brief Description:					
						-
				÷a		
	Are only control recognized in most of reciptors are as a second		V	$\overline{}$		
		Ц	Yes	ᆜ	No	
3.	Have any control measures failed and require replacement?		Yes	Ш	No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary of the attached Corrective Action Form.)	correct	ive actions :	should b	e descr	ibed on

Page 5 of 8

			Permit Track	ng #:	For Agency U
Ind	dustrial Activity Area:	(Cac)			· · · · · · · · · · · · · · · · · · ·
1.	Brief Description:				
2.	Are any control measures in need of maintenance or repair?	П	Yes	\Box	No
3.		一		$\overline{}$	
		ᆜ	Yes	$\frac{\sqcup}{=}$	No
4.	,	Ш	Yes	Ц	No
	If YES, to any of these three questions, provide a description of the problem: (Any necessary of the attached Corrective Action Form.)	correc	tive actions	should	be described on
Inc	dustrial Activity Area:				
1.	Brief Description:				
2.	Are any control measures in need of maintenance or repair?	\Box	Yes	П	No :
3.	Have any control measures failed and require replacement?		Yes	믐	No
		<u> </u>		<u> </u>	2
4.	Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary of the problem).		Yes	<u> </u>	No
	the attached Corrective Action Form.)	orrect	ive uctions	srioula L	е иезспреа оп

Perm	it T	rack	ing	#.

	ction IV. Corrective Actions							
	mplete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy spage for additional corrective actions or reviews.							
Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to								
	dress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not en completed at the time of your previous annual report.							
1.	Corrective Action # 0 of 0 for this reporting period.							
2.	Is this corrective action:							
	An update on a corrective action from a previous annual report; or							
	A new corrective action?							
3.	Identify the condition(s) triggering the need for this review:							
	Unauthorized release of discharge							
	Numeric effluent limitation exceedance							
	Control measures inadequate to meet applicable water quality standards							
	Control measures inadequate to meet non-numeric effluent limitations							
	Control measures not properly operated or maintained							
	Change in facility operations necessitated change in control measures							
	Average benchmark value exceedance							
	Other (describe):							
4.	Briefly describe the nature of the problem identified:							
5.	Date problem identified:							
6.	How problem was identified:							
	Comprehensive site inspection							
	Quarterly visual assessment							
	Routine facility inspection							
-	Notification by EPA or DEC							
	Other (describe):							
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.							
8.	Did/will this corrective action require modification of your SWPPP? Yes No							

or	Agei	ncv	ISP

Permit Tracking #:

		36.	b) 04					
9.	Date corrective action initiated:							
10.	Date corrective action completed:	Or expected to b	e completed:					
11.	If corrective action not yet completed, provid inspections and describe any remaining steps corrective action:	e the status of the corrective action (including timeframes associated wi	as the time of the comprehensive site ith each step) necessary to complete the					
	tion V. Annual Report Certification							
	npliance Certification	·						
that	you certify that your annual inspection has me i, based upon the results of this inspection, to upliance with the permit?							
	If NO, summarize why you are not in complian	nce with the permit:						
Municipality of Anchorage Facilities are not regulated under conditions set forth by the Multi-sector permit, but by its MS4 instead.								
		- v	- v v					
An	nual Report Certification							
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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.								
E	ric Hodgson	Superintendent	eric.hodgson@anchorageak.gov					
Na	me of Authorized Representative	Title	12/6/2023					
	Signature		Date Signed					

				A	
or	Ag	en	CV	Use	

Permit Tracking #:



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Information	n							
Facility Name				APDES P	ermit Trackin	g Number		
Native Heritage Center Snow Disposal Site Not Applicable						ole		
Facility Physical Address								
Street		City				State	Zip Code	
8902 Heritage Center	Drive		Anchorage			Alaska	99504	
Contact Person	Title		Phone		Email			
Eric Hodgson	Supe	rintendent	(907) 343	3-8100	eric.	hodgson@ar	nchorageak.gov	
Lead Inspector's Name	Additional Inspect		Additional Insp	ector's Nar	ne	Inspection Date		
Riddick Proveaux	Dustin F	Richmond				1	1/27/2023	
Section II. General Inspection	Findings							
1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to storm water? If NO, describe why not:								
Note : Complete Section III of this for parts 2 and 3 below, where pollutan	ts may be expose	d to storm water.	V			or as newly de	efined, in Section II	
2. Did this inspection identify a	ny storm water	or non-storm water	er outfalls no	ot previo	usly [Yes	✓ No	
identified in your SWPPP?		· ·					<u> </u>	
If YES, for each location, do measures in place:	escribe the source	es of those storm wa	ter and non-si	torm wate	er discharge	es and any asso	ociated control	
÷								

For	Agency	1156
1 01	, Periol	030

	Permit Tracking #:
	Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
1	Did you review sterm water manitaring date as part of this
	Did you review storm water monitoring data as part of this inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
-	
	Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring:
site insp	ow and ice is present through out the site due to winter conditions. All outfalls, BMP's, and on drainage system are covered in snow and frozen. Prior to these freezing conditions, a routine pection was performed. In the routine inspection is was observed that no maintenance was uired and all BMP's were free of pollutants and functioning per SWPPP plans and designs.
:	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection?
	If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions? Example to the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of comprehensive storm water inspection.

Permit Track	king #:	
--------------	---------	--

Section III. Industrial Activity Area Specific Findings					
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional industrial activity areas.					
In reviewing each area, you should consider:					
 Industrial materials, residue, or trash that may have or could come into contact with storm water; 					
 Leaks or spills from industrial equipment, drums, tanks, and other containers; Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and 					
				i	
the control of the co					
Industrial Activity Area: RAP Access Road					
1. Brief Description:					
The RAP Access Road is utilize by heavy equipment during facility operations. Snow and ice is present through out the site at time of inspection. The RAP Access Road was cleared of heavy snow. No evidence of tracking or pollutants were observed at this time.					
2. Are any control measures in need of maintenance or repair?		Yes	√	No	
3. Have any control measures failed and require replacement?		Yes	✓	No	
4. Are any additional/revised control measures necessary in this area?		Yes	✓	No	
If YES, to any of these three questions, provide a description of the problem: (Any necessal the attached Corrective Action Form.)	ycorrecti	·		·	
Industrial Activity Area: Snow Disposal Pad 1. Brief Description:					
The Snow Disposal Pad has have equipment traveling across it frequently in order to stockpile snow. Snow and ice covers the site due to winter conditions. The Snow Disposal Pad has been cleared of all heavy snow, allowing equipment to transverse across it. Snow is being stockpile in sequence and per SWPPP plans and designs.					
2. Are any control measures in need of maintenance or repair?		Yes	✓	No	
3. Have any control measures failed and require replacement?		Yes	√	No	
4. Are any additional/revised control measures necessary in this area?		Yes	√	No	
If YES, to any of these three questions, provide a description of the problem: (Any necessar the attached Corrective Action Form.)	y correcti	ve actions s	hould b	e described on	

	Permit Trackin	ng #:	For Agency U
Industrial Activity Area: Staging Area			
1. Brief Description:			
Two pieces of equipment (two Dozers) was present on site at time of inspectation cleared from staging area at this time. There was no evidence of pothis time.			
Are any control measures in need of maintenance or repair?	Yes	√	No
Have any control measures failed and require replacement?	Yes	√	No
4. Are any additional/revised control measures necessary in this area?	Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary correttee attached Corrective Action Form.)	ctive actions s	should b	e described on
Industrial Activity Area: Retention Basin			
1. Brief Description:			
The Retention Basin receives and retains runoff from the Snow Disposal F Road. The runoff from both of these area are exposed to potential pollutar equipment and facility operations. The Retention Basin was frozen and conthe inspection due to winter conditions. Prior to these conditions, at routin performed. In the routine inspection there was no evidence of pollutants a funcitioning per SWPPP plans and designs.	nts from hovered in se e inspection	eavy snow a on wa	at time of s
2. Are any control measures in need of maintenance or repair?	Yes	√	No
3. Have any control measures failed and require replacement?	Yes	√	No
4. Are any additional/revised control measures necessary in this area?	Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary correttee attached Corrective Action Form.)	ctive actions s	hould be	described on

MSGP Annual Report (Oct 2020) Page 4 of 8

For	Agency	Use

		remiii ma	CKIIIg #	
Industrial Activity Area:				
1. Brief Description:				
Are any control measures in need of maintenance or repair?		Yes	☐ No	
3. Have any control measures failed and require replacement?		Yes	☐ No	
4. Are any additional/revised control measures necessary in this area?		Yes	No	
If YES, to any of these three questions, provide a description of the problem: (Any necess the attached Corrective Action Form.)	ary correc	tive actio	ns should be descri	bed on
the attached corrective Action Form.)				
B a a a a a a a			ž	
Industrial Activity Area:	un.			
Brief Description:				
			*	
Are any control measures in need of maintenance or repair?		Yes	No No	
Have any control measures failed and require replacement?		Yes	No No	
4. Are any additional/revised control measures necessary in this area?		Yes	No	
If YES, to any of these three questions, provide a description of the problem: (Any necess the attached Corrective Action Form.)	ary correct	tive action	ns should be describ	bed on
				×.
-				

MSGP Annual Report (Oct 2020) Page 5 of 8

or	Δσ	er	CV	110	93

Permit Tracking #: _ Industrial Activity Area: 1. Brief Description: 2. Are any control measures in need of maintenance or repair? Yes No 3. Have any control measures failed and require replacement? Yes No 4. Are any additional/revised control measures necessary in this area? Yes No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.) Industrial Activity Area: 1. Brief Description: 2. Are any control measures in need of maintenance or repair? Yes No 3. Have any control measures failed and require replacement? Yes No 4. Are any additional/revised control measures necessary in this area? Yes No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)

MSGP Annual Report (Oct 2020) Page 6 of 8

Permit	Trac	king	#:

Co thi Inc	ection IV. Corrective Actions mplete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy is page for additional corrective actions or reviews. It will be a corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to a dress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not encompleted at the time of your previous annual report.
1.	Corrective Action # 0 of 0 for this reporting period.
2.	Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
	Average benchmark value exceedance
	Other (describe):
	Briefly describe the nature of the problem identified:
5.	Date problem identified:
6.	How problem was identified:
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
e:	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
8.	Did/will this corrective action require modification of your SWPPP? Yes No

For Agency Use

Permit Tracking #: _

9. Date corrective action initiated:		- d
10. Date corrective action completed:	Or expected to b	e completed:
11. If corrective action not yet completed, provide inspections and describe any remaining steps (corrective action:		
Section V. Annual Report Certification		-
Compliance Certification		
Do you certify that your annual inspection has met		
that, based upon the results of this inspection, to t compliance with the permit?	ne best of your knowledge, you are	in 🕢 Yes 🗌 No
If NO, summarize why you are not in complian	ce with the permit:	
Municipality of Anchorage Facilities are permit, but by its MS4 instead.		tions set forth by the Multi-sector
Annual Report Certification		
I certify under penalty of law that this document a accordance with a system designed to assure that Based on my inquiry of the person or persons who information submitted is, to the best of my knowl significant penalties for submitting false information	equalified personnel properly gathe o manage the system, or those pers ledge and belief, true, accurate, and	er and evaluate the information submitted. son directly responsible for gathering the d complete. I am aware that there are
	Superintendent	eric.hodgson@anchorageak.gov
Name of Authorized Representative Signature	Title	12/6/2023 Date Signed

-			
For	Δσι	anc	Use
1 01	75	CITCY	USC

	For Agency use
Permit Tracking #:	



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Informatio	n								
Facility Name				APDES P	ermit Tracking				
	n View Snow D	isposal Site			1	Not Applica	ble		
Facility Physical Address				-					
Street		City				State	Zip Code		
4800 Block of Mountain Vi			Anchorage			Alaska	9	99501	
Contact Person	Title		Phone Email						
Eric Hodgson		rintendent	(907) 343-8100 eric.hodgson@a					eak.gov	
Lead Inspector's Name	Additional Inspect		Additional Insp	ector's Nar	me	Inspection D			_
Riddick Proveaux	Dustin F	Richmond					11/27/20:	23	
Section II. General Inspection	Findings								
1. As part of this comprehensiv	e site inspectio	n, did you inspect a	all potential	pollutan	t r	7			
sources, including areas whe	re industrial ac	tivity may be expos	sed to storm	water?	1	Yes		No	
If NO, describe why not:									
~									
58									
	~		· ·			*			12
									- 1
									- 1
Note: Complete Section III of this for	m for each indust	rial activity area insp	ected and inc	luded in y	our SWPPP o	or as newly d	efined, in	Section II	
parts 2 and 3 below, where pollutan									
2. Did this inspection identify a	ny storm water	or non-storm water	er outfalls no	ot previo	usly Γ	7 v		NI-	
identified in your SWPPP?	3		*		L	Yes	V	No	
If YES, for each location, do	escribe the source	es of those storm wa	ter and non-s	torm wate	er discharges	and any ass	ociated co	ontrol	
measures in place:									
-									8

For	Agency	Ilco
1 01	Agency	USE

		Permit Track	king #:	For	Agency Us
3.	Did this inspection identify any sources of storm water or non-storm water discharges not				N
	previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be prese control measures in place:		Yes lischarge	s, and a	No ny
4.	Did you review storm water monitoring data as part of this				
7.	inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resu	LV.	perf	no moni ormed w:	toring
5.	Describe any evidence of pollutants entering the drainage system or discharging to surface waround outfalls, including flow dissipation measure to prevent scouring:	aters, and	the con	dition o	fand
Sn	now and ice covered the site due to winter conditions. All outfalls and on	-site drai	nage	syste	ms
pe	ere frozen or covered in snow. Prior to this freezing conditions, a routine rformed. The routine inspection showed that no maintenance was requi				ere
pe	rforming per SWPPP plans and designs.				
6.	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit,				
	since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified		Yes	\checkmark	No
	as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 were addressed by these corrective actions?		>		
	te: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any	conditions id	lentified	as a res	ult of
unis	s comprehensive storm water inspection.				

MSGP Annual Report (Oct 2020) Page 2 of 8

or A	Δσε	nc	v I	Se

For Agency Use Permit Tracking #: _____

Section III. Industrial Activity Area Specific Findings				
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this	page for	additional	industrial	activity areas.
In reviewing each area, you should consider: • Industrial materials, residue, or trash that may have or could come into contact with storm water;				
 Leaks or spills from industrial equipment, drums, tanks, and other containers; 				
Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and				
 Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas. 				
Industrial Activity Area: RAP Access Road				
Brief Description:				
Heavy equipment utilize the RAP access road to enter the site and to pad during facility operations. Snow and ice is present on site at time	of ins	pection	n. Acc	ess road
entering from North of site was cleared of heavy snow and maintained				
and secured. Access road entering West of site was not accessible de	ue to	heavy	snow,	gate was
closed and secured.				
2. Are any control measures in need of maintenance or repair?		Yes	✓	No
3. Have any control measures failed and require replacement?		Yes	\checkmark	No
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	v correc	tive action	s should l	be described on
Industrial Activity Area: Retention Basins 1, 2, & 3 1. Brief Description:				
Detention Paging regions and ratein runoff from DAD access read and	00014	, diana	مما مم	۱ ۸۱۱ نم
Retention Basins recieve and retain runoff from RAP access road and			•	
which are exposed to potential pollutants from heavy equipment and d				
the Retention Basins are frozen and covered in snow. Prior to the free	_			
inspection was performed. The routine inspection presented that the I	pasins	s were	free of	pollutants
and were functioning per SWPPP plans and designs.				
2. Are any control measures in need of maintenance or repair?		Yes	1	No
3. Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary	correc	tive action	s should b	be described on
the attached Corrective Action Form.)				
				ω.

Industrial Activity Area: Snow Disposal Pad				
1. Brief Description:				
The Snow Disposal Pad has heavy equipment traveling across it free snow. Snow and ice was present due to winter conditions. The Sno cleared of all heavy snow. Snow pad stockpiling of snow is being se SWPPP plans and designs.	w Disp	osal P	ad has	been
2. Are any control measures in need of maintenance or repair?		Yes	√	No
3. Have any control measures failed and require replacement?		Yes	\checkmark	No
4. Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No
If YES, to any of these three questions, provide a description of the problem: (Any necessor the attached Corrective Action Form.)	ry correct	tive action	ns should i	be described on
			7.4.1	Sp.
Industrial Activity Area: Staging Area				
Industrial Activity Area: Staging Area 1. Brief Description:				
	lesigna	ated St	aging /	Area was
 Brief Description: No heavy equipment was present on site at time of inspection. The of 	lesigna	ated St	aging /	Area was
 Brief Description: No heavy equipment was present on site at time of inspection. The of 	lesigna	ated St	aging /	Area was
Brief Description: No heavy equipment was present on site at time of inspection. The colleared of heavy snow and was free of pollutants.	lesigna	9	aging /	
 Brief Description: No heavy equipment was present on site at time of inspection. The or cleared of heavy snow and was free of pollutants. Are any control measures in need of maintenance or repair? 	lesigna	Yes	aging /	No
 Brief Description: No heavy equipment was present on site at time of inspection. The or cleared of heavy snow and was free of pollutants. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? 		Yes Yes Yes	✓ ✓ ✓	No No
 Brief Description: No heavy equipment was present on site at time of inspection. The or cleared of heavy snow and was free of pollutants. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary) 		Yes Yes Yes	✓ ✓ ✓	No No
 Brief Description: No heavy equipment was present on site at time of inspection. The or cleared of heavy snow and was free of pollutants. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary) 		Yes Yes Yes	✓ ✓ ✓	No No
 Brief Description: No heavy equipment was present on site at time of inspection. The or cleared of heavy snow and was free of pollutants. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary) 		Yes Yes Yes	✓ ✓ ✓	No No

MSGP Annual Report (Oct 2020) Page 4 of 8

	For Agency U
	Permit Tracking #:
ndustrial Activity Area: Vegetative Buffer Strips	
. Brief Description:	

In 1. The Vegetative Buffer Strips receive runoff from the RAP Access Road and Snow Disposal Pad. The runoff from these areas have been exposed to potential pollutants from heavy equipment and facility operations. All Buffer Strips were frozen and covered in snow due to winter conditions. A routine inspection was performed prior to these conditions. In the routine inspection it was observed that the Vegetative Buffer Strips were free of pollutants and BMP's were functioning per SWPPP plans and designs. 2. Are any control measures in need of maintenance or repair? **/** Yes No 3. Have any control measures failed and require replacement? Yes No 4. Are any additional/revised control measures necessary in this area? Yes No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.) Industrial Activity Area: 1. Brief Description: 2. Are any control measures in need of maintenance or repair? Yes No 3. Have any control measures failed and require replacement? Yes No 4. Are any additional/revised control measures necessary in this area? Yes No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)

or	Agency	Use
U		

		1	Permit Trackir	ıg #:		
Ind	dustrial Activity Area:		***			
1.	Brief Description:					
2.	Are any control measures in need of maintenance or repair?	$\overline{\Box}$	Yes	\Box	No	
-		$\frac{\square}{\square}$				
3.		ᆜ	Yes	Ц	No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	/ correct	tive actions s	hould	oe descr	ibed on
		0.00			*1	
Ind	lustrial Activity Area:					
1.						
	*	*			ē	
_						
2.	Are any control measures in need of maintenance or repair?	Ц_	Yes	Ц	No	
3.	Have any control measures failed and require replacement?		Yes		No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	correct	rive actions s	hould l	e descr	ibed on

MSGP Annual Report (Oct 2020)

Page 6 of 8

Permit Tracking	z #:
-----------------	------

	ction IV. Corrective Actions
this	mplete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy spage for additional corrective actions or reviews.
Inci ada	lude both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to dress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not
	en completed at the time of your previous annual report.
1.	Corrective Action # 0 of 0 for this reporting period.
2.	Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
	Average benchmark value exceedance
	Other (describe):
4.	Briefly describe the nature of the problem identified:
5.	Date problem identified:
6.	How problem was identified:
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
8.	Did/will this corrective action require modification of your SWPPP?

MSGP Annual Report (Oct 2020) Page 7 of 8

_		1000
⊦or	Agency	Use

		Permit Tracking #:
9. Date corrective action initiated:		
10. Date corrective action completed:	Or expected to	be completed:
11. If corrective action not yet completed, provide inspections and describe any remaining steps corrective action:		
Section V. Annual Report Certification		
Compliance Certification		
Do you certify that your annual inspection has me		
that, based upon the results of this inspection, to compliance with the permit?	the best of your knowledge, you a	re in 🕢 Yes 📗 No
If NO, summarize why you are not in complian	nce with the permit:	
Municipality of Anchorage Facilities are permit, but by its MS4 instead.	e not regulated under cond	ditions set forth by the Multi-sector
I certify under penalty of law that this document accordance with a system designed to assure that Based on my inquiry of the person or persons whinformation submitted is, to the best of my know significant penalties for submitting false information.	It qualified personnel properly gath no manage the system, or those pe rledge and belief, true, accurate, a	her and evaluate the information submitted. erson directly responsible for gathering the nd complete. I am aware that there are
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov
Name of Authorized Representative	Ťitle	Email
3531		12/6/2023
Signature		Date Signed



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Informatio	n							
Facility Name APDES Permit Tracking				g Number				
Orca Street	Orca Street Lighting Storage Facility				Not Applicat	ole		
Facility Physical Address								
Street		City				State	Zip Code	
245 Orca Street			Anchorage			Alaska	99501	
Contact Person	Title		Phone		Email		•	
Eric Hodgson		rintendent	(907) 343	8-8100	eric.h	nodgson@ar	nchorageak.gov	
Lead Inspector's Name	Additional Inspect		Additional Inspe	ector's Nan	ne	Inspection Da	ite	
Riddick Proveaux	Dustin F	Richmond				1	1/28/2023	
Section II. General Inspection	Findings							
1. As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to storm water? If NO, describe why not:								
Note: Complete Section III of this form parts 2 and 3 below, where pollutant 2. Did this inspection identify a	ts may be exposed	d to storm water.				or as newly de	fined, in Section II	
identified in your SWPPP?	., storm water	or non-storm wat	, ,	r bi eviot	isiy	Yes	√ No	.
If YES, for each location, de	escribe the source	es of those storm wa	ter and non-st	orm wate	r discharge	s and any asso	ciated control	
measures in place:						2.1.7 0330		
-								

Permit Tracking #:

3.	Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any
	control measures in place:
4.	Did you review storm water monitoring data as part of this Yes No. NA, no monitoring
	inspection to identify potential pollutant hotspots? If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
5.	Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and
٥.	around outfalls, including flow dissipation measure to prevent scouring:
Sn	now and ice was present though out site at time of inspection. All outfalls and on-site drainage are
	ozen and covered in snow due to these conditions. Prior to the winter conditions, a routine
	spection was performed. The routine inspection concluded that the on-site drainage and out falls ere free of pollutants and BMP's are functioning per SWPPP plans and design.
VVC	se free of politicality and biving a fe functioning per Syvene plans and design.
6.	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit,
	since your last annual report submission (or since you received authorization to discharge under this permit if this is your first annual report), including any corrective actions identified Yes No
	as a result of this annual comprehensive site inspection?
	If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions?
	te: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of
thic	s comprehensive storm water inspection

20 000.0		
Permit	Tracking #	

Section III. Industrial Activity Area Specific Findings
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional industrial activity areas.
In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with storm water;
 Leaks or spills from industrial equipment, drums, tanks, and other containers;
 Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and
 Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas.
Industrial Activity Area: RAP Access Road
1. Brief Description:
- Prior Pessification
The RAP Access Road is utilized frequently by heavy equipment and facility operations. At time of the inspection there was snow and ice present. All heavy snow was cleared from the access road and no evidence of tracking or pollutants were observed.
2. Are any control measures in need of maintenance or repair?
3. Have any control measures failed and require replacement? Yes Vo
4. Are any additional/revised control measures necessary in this area? Yes Vo
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)
Industrial Activity Area: Discharge point #1 1. Brief Description:
Discharge point #1 receives runoff from the RAP Access Road. The runoff from this area has been exposed to potential pollutants from heavy equipment and facility operations. Due to winter conditions, the discharge point was frozen. Prior to these conditions, a routine inspection was performed. In this routine inspection it was observed that there was no pollutants present at time of the inspection.
2. Are any control measures in need of maintenance or repair?
3. Have any control measures failed and require replacement?
4. Are any additional/revised control measures necessary in this area?
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)
·

	For Agency Use Permit Tracking #:	
ndustrial Activity Area: Vegetative Buffer Strip		
Brief Description:		

The Vegetative Buffer Strip receives runoff from the entire site (equipment storage, material storage, RAP access road). Runoff from the site has been exposed to potential pollutants from heavy equipment, storage material, and facility operations. The Buffer Strip was covered in snow and ice at time of the inspection, due to winter conditions. Prior to these conditions, a routine inspection was performed. In this routine inspection it was observed that the Vegetative Buffer Strip was free of pollutants and was funcitioning per SWPPP plans and designs. 2. Are any control measures in need of maintenance or repair? Yes No 3. Have any control measures failed and require replacement? Yes No 4. Are any additional/revised control measures necessary in this area? Yes 1 No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.) Industrial Activity Area: Equipment/Material Storage Areas 1. Brief Description: All Equipment and Material storage areas through out the site are stored and identifed per SWPPP plans. No pollutants were observed in or around the storage areas. 2. Are any control measures in need of maintenance or repair? 1 Yes No 3. Have any control measures failed and require replacement? Yes No 4. Are any additional/revised control measures necessary in this area? Yes No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)

MSGP Annual Report (Oct 2020)

Permit Tracking #:

In	dustrial Activity Area: Sanitation Station Location					
1.	Brief Description:					
Tł ob	ne Sanitation Station was located at the correct location per SWPPP oserved at this time.	plan	s. No	polluta	nts wer	е
2.	Are any control measures in need of maintenance or repair?		Yes	✓	No	
3.	Have any control measures failed and require replacement?		Yes	✓	No	
4.	Are any additional/revised control measures necessary in this area?		Yes	/	No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	y correc	tive actio	ons should	be describe	ed on
				~		
Inc	dustrial Activity Area:					
1.	Brief Description:					
1.	Brief Description:					
1.	Brief Description:					
1.	Brief Description:					
1.	Brief Description:					
2.	Are any control measures in need of maintenance or repair?		Yes		No	
2.	Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement?		Yes		No	
2.	Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area?		Yes		No No	
2.	Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement?	correct	Yes	ns should l	No No	d on
2.	Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary)		Yes		No No	d on
2.	Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary)	o correct	Yes		No No	d on
2.	Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary)		Yes	ns should l	No No	d on

For	Agency	Use
-----	--------	-----

Permit Tracking #: __

Inc	dustrial Activity Area:					
1.	Brief Description:					
2.	Are any control measures in need of maintenance or repair?		Yes		No	
3.	Have any control measures failed and require replacement?		Yes		No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	y correct	ive actions	should l	be descri	bed on
Ind	ustrial Activity Area:					
1.	Brief Description:					
	*					
2.	Are any control measures in need of maintenance or repair?		Yes		No	w.
3.	Have any control measures failed and require replacement?		Yes		No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	correcti	ve actions	should b	e descril	bed on
						70

Enr	Agency	Hen
FUI	Agency	USE

Permit Tracking #: _____

Co thi Inc	ection IV. Corrective Actions Implete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy is page for additional corrective actions or reviews. Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to lidress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not en completed at the time of your previous annual report.
1.	Corrective Action # 0 of 0 for this reporting period.
2.	Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
207	Average benchmark value exceedance
	Other (describe):
4.	Briefly describe the nature of the problem identified:
	·
5.	Date problem identified:
6.	How problem was identified:
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
8.	Did/will this corrective action require modification of your SWPPP?

For Agency Use Permit Tracking #: _

9. Date corrective action initiated:		
10. Date corrective action completed:	Or expected to	be completed:
If corrective action not yet completed, providing inspections and describe any remaining steps corrective action:	de the status of the corrective actio s (including timeframes associated v	n as the time of the comprehensive site with each step) necessary to complete the
Section V. Annual Report Certification Compliance Certification		
Do you certify that your annual inspection has me	at the requirements of Port C 2 - fth	
that, based upon the results of this inspection, to	the best of your knowledge, you ar	re in Ves No
compliance with the permit?		Tes III
If NO, summarize why you are not in complia	nce with the permit:	
Municipality of Anchorage Facilities ar permit, but by its MS4 instead.	e not regulated under cond	litions set forth by the Multi-sector
Annual Report Certification		
I certify under penalty of law that this document accordance with a system designed to assure that Based on my inquiry of the person or persons whinformation submitted is, to the best of my know significant penalties for submitting false information.	It qualified personnel properly gath no manage the system, or those per rledge and belief, true, accurate, an	ner and evaluate the information submitted. rson directly responsible for gathering the nd complete. I am aware that there are
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov
Name of Authorized Representative	Title	Email
300		12/6/2023
Signature		Date Signed



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Information	on .							
Facility Name APDES Permit Tracking Number								
Sitka Street Snow Disposal Site					errite tracking	5 Humber		
Facility Physical Address								
Street		City			T	State	Zip Co	de
1505 Sitka Street	t		An\			Alaska		99501
Contact Person	Title		Phone		Email	7.1145714		
Eric Hodgson	Super	rintendent	(907) 343	3-8100	eric.h	odgson@a	nchora	geak.gov
Lead Inspector's Name	Additional Inspect	or's Name	Additional Insp	ector's Nar		Inspection Date		
Riddick Proveaux	Dustin F	Richmond	-				1/22/2	023
Section II. General Inspection	n Findings	440-22-03-03-03-03-03-03-03-03-03-03-03-03-03-						
As part of this comprehensive sources, including areas who if NO, describe why not:	ve site inspection	n, did you inspect tivity may be expo	all potential osed to storm	pollutant water?	t [Yes		No
Note: Complete Section III of this for parts 2 and 3 below, where pollutan	ts may be exposed	d to storm water.				or as newly de	efined, ii	า Section II
Did this inspection identify a identified in your SWPPP?	ny storm water	or non-storm wat	er outfalls no	t previou	usly [Yes	1	No
If YES, for each location, de	escribe the source	es of those storm	ator and non -	orm wat-	۔۔۔۔۔۔اممالہ س		الل عا ،	
measures in place:	assine the source	23 OF CHOSE SCOTTI WA	ater and non-st	.orm wate	: uischarges	and any asso	ociated (control
45								
1.0								
e								

For Agency Use

Permit Tracking #: _

3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? ✓ No
If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any
control measures in place:
4. Did you review storm water monitoring data as part of this
inspection to identify potential pollutant hotspots? Yes No NA, no monitoring performed
If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
, and a second destricts resulting from this review.
5. Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and
around outfalls, including flow dissipation measure to prevent scouring:
, comments of provinces of the provinces
The site is covered in snow and ice. All outfalls and drainage systems are frozen and covered in
snow at time of the inspection. Prior to those winter conditions a resulting increasting covered in
snow at time of the inspection. Prior to these winter conditions, a routine inspection was performed.
The inspection showed the drainage system and outfalls were free of pollutants and BMP's were
maintained and functioning per SWPPP plans and designs.
6. Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit
, as specified in tare betting,
since your last annual report submission (or since you received authorization to discharge
under this permit it this is your first annual report), including any corrective actions identified ————————————————————————————————————
as a result of this annual comprehensive site inspection? If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP
were addressed by these corrective actions?
Note: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of
this comprehensive storm water inspection.

Section III. Industrial Activity Area Specific Findings
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional industrial activity areas.
In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with storm water;
 Leaks or spills from industrial equipment, drums, tanks, and other containers;
Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and
 Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas.
Industrial Activity Area: RAP Access Road
1. Brief Description:
The RAP Access Road is utilize by heavy equipment to access snow disposal pad. Heavy snow was present through out site. The access road has been cleared and maintained. No tracking or pollutants were observed at this time.
2. Are any control measures in need of maintenance or repair? ☐ Yes ✓ No
3. Have any control measures failed and require replacement?
4. Are any additional/revised control measures necessary in this area? Yes ✓ No If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on
Industrial Activity Area: Snow Disposal Pad 1. Brief Description:
The Snow Disposal pad stockpiles snow in a specific stockpile sequence. Heavy equipment travels across if regularly in order to stockpile snow. Snow pad has been cleared of heavy snow and is being correctly stockpiled in the right sequence per SWPPP plans and designs.
2. Are any control measures in need of maintenance or repair?
3. Have any control measures failed and require replacement? ☐ Yes ✓ No
4. Are any additional/revised control measures necessary in this area?
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)

Industrial Activity Area: Aggregate Stockpile				
1. Brief Description:				
Aggregate Stockpile is present and covered in snow. The stockpile i identified location per SWPPP plans and design.	s being	correct	ly stor	ed in the
2. Are any control measures in need of maintenance or repair?		Yes	√	No
3. Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes		No
If YES, to any of these three questions, provide a description of the problem: (Any necessal the attached Corrective Action Form.)	ary correctiv	e actions s	should be	e described on
				54
· · · · · · · · · · · · · · · · · · ·	- 27			~
Industrial Activity Area: Stoging Area				
Industrial Activity Area: Staging Area 1. Brief Description:	-			
1. Brief Description:				
	low atta o evider	chment	is wo	orking site nts.
 Brief Description: Snow and ice is covers the whole site. One front end loader with a p 	low atta	chment	is wo	orking site nts.
 Brief Description: Snow and ice is covers the whole site. One front end loader with a p 	low atta o evider	chment	is wo	orking site nts.
 Brief Description: Snow and ice is covers the whole site. One front end loader with a p 	low atta	chment ice of p	olluta	orking site nts.
Brief Description: Snow and ice is covers the whole site. One front end loader with a p at this time. The staging area is cleared of heavy snow and shows n	low atta	nce of p	olluta	nts.
 Brief Description: Snow and ice is covers the whole site. One front end loader with a p at this time. The staging area is cleared of heavy snow and shows n Are any control measures in need of maintenance or repair? 	low atta	Yes	olluta	nts.
 Brief Description: Snow and ice is covers the whole site. One front end loader with a p at this time. The staging area is cleared of heavy snow and shows n Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? 	o evider	Yes Yes	olluta ✓	No No
 Brief Description: Snow and ice is covers the whole site. One front end loader with a pat this time. The staging area is cleared of heavy snow and shows not at this time. The staging area is cleared of heavy snow and shows not not staging area is cleared of heavy snow and shows not not stage. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessor) 	o evider	Yes Yes	olluta ✓	No No
 Brief Description: Snow and ice is covers the whole site. One front end loader with a pat this time. The staging area is cleared of heavy snow and shows not at this time. The staging area is cleared of heavy snow and shows not not staging area is cleared of heavy snow and shows not not stage. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessor) 	o evider	Yes Yes	olluta ✓	No No
 Brief Description: Snow and ice is covers the whole site. One front end loader with a pat this time. The staging area is cleared of heavy snow and shows not at this time. The staging area is cleared of heavy snow and shows not not staging area is cleared of heavy snow and shows not not stage. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessor) 	o evider	Yes Yes	olluta ✓	No No
 Brief Description: Snow and ice is covers the whole site. One front end loader with a pat this time. The staging area is cleared of heavy snow and shows not at this time. The staging area is cleared of heavy snow and shows not not staging area is cleared of heavy snow and shows not not stage. Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessor) 	o evider	Yes Yes	olluta ✓	No No

Permit	Tracking	#:	
	Tracking		

Industrial Activity Area: Sedimentation Pond				
1. Brief Description:				
Sedimentation pond receives exposed runoff or stomwater from hear operations. Pond is covered in snow and is frozen, due to winter co conditions, a routine inspection was performed. The inspection show pollutants and is functioning per SWPPP plans and designs.	nditions	s. Prior	r to the	ese
2. Are any control measures in need of maintenance or repair?		Yes	\checkmark	No
3. Have any control measures failed and require replacement?		Yes	\checkmark	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessor the attached Corrective Action Form.)	ary correct	ive actions	should b	e described on
				-
			100 to	^
Industrial Activity Area: O'L I O 'L O				
Industrial Activity Area: Oil and Grit Separator 1. Brief Description:				
Oil and Grit Separator receives stormwater from sedimentation pond. and covered in snow. Prior to these conditions a rountine inspection inspection showed that separator was free of pollutants and was open	was pe	rforme	d. Th	e routine
			*	
2. Are any control measures in need of maintenance or repair?				
Have any control measures failed and require replacement?		Yes	\checkmark	No
		Yes		No No
Are any additional/revised control measures necessary in this area?			V	
	Ty correction	Yes Yes	✓ ✓	No No
Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary)	ry correction	Yes Yes	✓ ✓	No No
Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary)	Try correction	Yes Yes	✓ ✓	No No
Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary)	ry correction	Yes Yes	✓ ✓	No No
Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary)	ry correction	Yes Yes	✓ ✓	No No

Industrial Activity Area: Vegetative Buffer Strip				
1. Brief Description:				
The Vegetative Buffer Strip receives runoff from the snow disposal particle pollutants from snow stockpile and heavy equipment. The buffer strip ice at time of the inspection. Prior to these winter conditions, a routing The vegetative buffer strip presented free of pollutants and is being many the strip presented free of pollutants.	p was e insp	covere	ed in so was po	now and erformed.
2. Are any control measures in need of maintenance or repair?		Yes	√	No
3. Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes	√	No
If YES, to any of these three questions, provide a description of the problem: (Any necessa the attached Corrective Action Form.)	y correc	tive action	s should	be described on
		·		
				100 1
Industrial Activity Area:				
1. Brief Description:				
*				
· · · · · · · · · · · · · · · · · · ·		*		
2 Are any central measures in meet of maintaining and a				
2. Are any control measures in need of maintenance or repair? 2. Have any control measures followed and require and requirements.	<u> </u>	Yes	ᆜ	No
Have any control measures failed and require replacement? Are any additional facilities and appears to the second s	-	Yes	ᆜ	No
4. Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessar)	, correct	Yes	should b	No
the attached Corrective Action Form.)	COTTECT	ve actions	SHOUIU	de describea on
				- 1
				1

Permit Trackin	g #:
----------------	------

Co thi Inc	ection IV. Corrective Actions complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy is page for additional corrective actions or reviews. Clude both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to lidress problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not een completed at the time of your previous annual report.
1.	Corrective Action # 0 of 0 for this reporting period.
2.	Is this corrective action:
	An update on a corrective action from a previous annual report; or
	A new corrective action?
3.	Identify the condition(s) triggering the need for this review:
	Unauthorized release of discharge
	Numeric effluent limitation exceedance
	Control measures inadequate to meet applicable water quality standards
	Control measures inadequate to meet non-numeric effluent limitations
	Control measures not properly operated or maintained
	Change in facility operations necessitated change in control measures
	Average benchmark value exceedance
	Other (describe):
5.	Date problem identified:
6.	How problem was identified:
	Comprehensive site inspection
	Quarterly visual assessment
	Routine facility inspection
	Notification by EPA or DEC
	Other (describe):
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.
8.	Did/will this corrective action require modification of your SWPPP?

For Agency Use

		Permit Tracking #:						
9. Date corrective action initiated:								
10. Date corrective action completed:	Or expected to b	pe completed:						
11. If corrective action not yet completed, provid inspections and describe any remaining steps corrective action:	e the status of the corrective action (including timeframes associated w	as the time of the comprehensive site vith each step) necessary to complete the						
Section V. Annual Report Certification Compliance Certification								
	Adh							
Do you certify that your annual inspection has me that, based upon the results of this inspection, to compliance with the permit?	the best of your knowledge, you are	e permit, and e in Ves No						
If NO, summarize why you are not in complian	The state of the s							
Municipality of Anchorage Facilities are permit, but by its MS4 instead.	40	tions set forth by the Multi-sector						
Annual Report Certification								
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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.								
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov						
Name of Authorized Representative	Title	Email						
20h		12/6/2023						
Signature		Date Signed						



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Information	n							
Facility Name APDES Permit Tracking Number								
Tudor Roa	ad Snow Dispos	sal Site				Not Applical	ole	
Facility Physical Address								
Street		City				State	Zip Code	
6135 East Tudor Ro			Anchorage			Alaska	99515	
Contact Person Title Phone Email								
Eric Hodgson		rintendent	(907) 343				nchorageak.gov	
Lead Inspector's Name	Additional Inspector's Name Additional Inspector's Name Inspection Date						ate	
Riddick Proveaux	Dustin F	Richmond	2000					
Section II. General Inspection Findings								
As part of this comprehensive sources, including areas who if NO, describe why not: Output Describe why not: Output Describe why not: Output Describe why not: Output Describe why not:						Yes	No	
Note: Complete Section III of this for parts 2 and 3 below, where pollutan	ts may be expose	d to storm water.				or as newly d	efined, in Section II	
Did this inspection identify a identified in your SWPPP?	iny storm water	or non-storm water	er outralls no	t previo	usiy [Yes	√ No	
If YES, for each location, d	escribe the source	es of those storm wat	ter and non-st	torm wate	er discharge	es and any asse	ociated control	
measures in place:		as of those storm war						

For Agency Use Permit Tracking #: Did this inspection identify any sources of storm water or non-storm water discharges not Yes No previously identified in your SWPPP? If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place: Did you review storm water monitoring data as part of this NA, no monitoring Yes inspection to identify potential pollutant hotspots? performed If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review: Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring: Winter conditions are present at this time with snow and ice covering the site. All outfalls and drainage systems are frozen or covered in snow. Prior to these conditions, a routine inspection was performed. The inspection results showed that no maintenance was required and all BMP's were functioning per SWPPP plans and designs. 6. Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit. since your last annual report submission (or since you received authorization to discharge

under this permit if this is your first annual report), including any corrective actions identified

If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP

Note: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of

as a result of this annual comprehensive site inspection?

were addressed by these corrective actions?

MSGP Annual Report (Oct 2020)

this comprehensive storm water inspection.

Tracking #:	

Section III. Industrial Activity Area Specific Findings									
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional industrial activity areas.									
In reviewing each area, you should consider: Industrial materials, residue, or trash that may have or could come into contact with storm water;									
• Leai	ks or spills from industrial equipment, drums, tanks, and other containers;								
 Offs 	ite tracking of industrial or waste materials from areas of no exposure to exposed areas; and								
	king or blowing of raw, final, or waste material from areas of no exposure to exposed areas.								
Industrial Ad	· · · · · · · · · · · · · · · · · · ·								
1. Brief Description:									
The RAP	access Road are directly utilize by heavy equipment enterin	a and	existin	a the	site Both				
access ga	ates are open and being used at time of inspection. Winter of	ondit	ione or	proc	ont of this				
time with	the site covered in snow and ice. The RAP access road have	o bo		bies	בווו מו ווווס				
maintaine	d. There is no signs of tracking or pollutants at this time.	e nee	en clear	ed an	u				
manname	a. There is no signs of tracking or politicants at this time.								
_									
2. Are any	control measures in need of maintenance or repair?		Yes	1	No				
2 11									
3. Have an	y control measures failed and require replacement?		Yes	1	No				
4									
4. Are any	additional/revised control measures necessary in this area?		Yes	\checkmark	No				
If YE	S, to any of these three questions, provide a description of the problem: (Any necessar	y correc	tive actions	s should	be described on				
the	attached Corrective Action Form.)								
Industrial Ac	tivity Area: Co Diana and D. J.								
1. Brief Des	tivity Area: Snow Disposal Pad								
1. Diffici Des	oription.								
Snow Dier	ocal Pad is utilize by began equipment that travels access to								
The whole	posal Pad is utilize by heavy equipment that travels across it	in ord	der to s	tockpi	le snow.				
i ne whoie	site is covered in snow and ice due to winter conditions. T	he sn	ow disp	osal p	oad has				
been clear	red of all heavy snow. The snow stockpiling is being sequer	ice ar	nd store	d per	SWPPP				
plans and	design.			•	•				
2. Are any o	control measures in need of maintenance or repair?		.,						
Z. Aleany	control measures in need of maintenance or repair?		Yes	\checkmark	No				
3. Have any	control measures failed and require replacement?								
5. Have any		Ш	Yes	\checkmark	No				
4. Are any a	additional/revised control measures necessary in this area?		V		5 5 1 12				
			Yes	✓	No				
If YE	S, to any of these three questions, provide a description of the problem: (Any necessary	correct	ive actions	should b	e described on				
the c	attached Corrective Action Form.)								
					1				
					- 1				

	ı	Permit Tracki	ing #:	For Agency U			
Industrial Activity Area: Staging Area							
1. Brief Description:							
At this time there is one front end load with a plow attachment, working of has been cleared of all heavy snow and show no evidence of pollutants	on s at tl	site. The	e stag	ing area			
2. Are any control measures in need of maintenance or repair?		Yes	\checkmark	No			
3. Have any control measures failed and require replacement?		Yes	√	No			
4. Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary control of the problem).		Yes	√	No			
the attached Corrective Action Form.)		-		and the second s			
Industrial Activity Area: Sedimentation Pond 1. Brief Description:							
Sedimentation Pond receives runoff from the snow disposal pad and access roads. Runoff from these two areas are exposed to potential pollutants from heavy equipment and snow stockpiles. Winter conditions were present at this time with snow and ice covering the sedimentation pond. Prior to these conditions, a routine inspection was performed. The routine inspection showed that the pond was free of pollutants and was functioning per SWPPP plans and designs.							
2. Are any control measures in need of maintenance or repair?		Yes	√	No			
3. Have any control measures failed and require replacement?		Yes	√	No			
4. Are any additional/revised control measures necessary in this area?		Yes		No			
If YES, to any of these three questions, provide a description of the problem: (Any necessary cor the attached Corrective Action Form.)	rectiv	e actions s	hould be	e described on			

For Agency Use	
----------------	--

	F	Permit Tra	acking #:	For Agency Us
Industrial Activity Area: Vegetative Buffer Strips				
1. Brief Description:				
The Vegetative Buffer Strips receive runoff from access roads, staging a disposal pad. All in which are exposed to heavy equipment and potentia facility operations. The buffers were covered in snow and ice at time of it conditions. Prior to these conditions, a routine inspection was performed is was observed that all Vegetative Buffers Strips were free of pollutants SWPPP plans and designs.	l po nsp l. l	ollutan pection n the i	nts from n due to routine	daily winter inspection
Are any control measures in need of maintenance or repair?		Yes	√	No
Have any control measures failed and require replacement?		Yes	√	No
4. Are any additional/revised control measures necessary in this area?		Yes	✓	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary cor the attached Corrective Action Form.)	rect	ive actio	ns should i	be described on
		-	2740	
Industrial Activity Area: Velocity Dissipaters				
1. Brief Description:				
There are three Velocity Dissipaters that slow down runoff from the access pad into the vegetative buffers and conveyance channel. The runoff form snow disposal pad have been exposed to potential pollutants and heavy the inspection the dissipaters were covered in snow and ice due to winter inspection was perfrmoed prior to these conditions. The routine inspection Dissipaters needed no maintenance and was functioning per SWPPP plant.	th equ co	e acce uipmei onditio howed	ess roa nt At th ns. A r d that th	d and ne time of outine ne Velocity
2. Are any control measures in need of maintenance or repair?]	Yes	√	No
3. Have any control measures failed and require replacement?		Yes	✓	No
4. Are any additional/revised control measures necessary in this area?		Yes	✓	No
If YES, to any of these three questions, provide a description of the problem: (Any necessary continue attached Corrective Action Form.)	recti	ve action	ns should b	e described on

			Permit Trackir	g #:		
In	dustrial Activity Area:					
1.	Brief Description:					
2.	Are any control measures in need of maintenance or repair?		Yes		No	
3.	Have any control measures failed and require replacement?		Yes		No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary of the attached Corrective Action Form.)	correc	tive actions s	hould	be descr	ibed on
	the attached corrective Action Form.)					
			*			
Inc	dustrial Activity Area:		6			
	Brief Description:					
e.						
2.	Are any control measures in need of maintenance or repair?		Yes		No	
3.	Have any control measures failed and require replacement?		Yes		No	
4.	Are any additional/revised control measures necessary in this area?		Yes		No	
	If YES, to any of these three questions, provide a description of the problem: (Any necessary of the attached Corrective Action Form.)	orrect	ive actions s	hould b	e descri	bed on

Permit Tracking #:	
--------------------	--

th Inc	omplete the is page footblete for the land in the land	r additional corrective of corrective of corrective actions that blems identified in the c	ic condition requiring a co actions or reviews. have been initiated or col	orrective action or a revie mpleted since the last ann er inspection. Include an u	ual report, and fut	ure corrective action	s needed to
1.	Correct	tive Action # 0	of 0	for this reporting	g period.		
2.	Is this o	corrective action:					
		An update on a cor	rective action from a p	revious annual report;	or		
		A new corrective a	ction?				
3.	Identify	y the condition(s) trig	gering the need for this	s review:			
		Unauthorized relea	se of discharge				
		Numeric effluent li	mitation exceedance				
		Control measures in	nadequate to meet app	licable water quality st	andards		
		Control measures in	nadequate to meet nor	n-numeric effluent limit	ations		
		Control measures n	ot properly operated o	r maintained			
		Change in facility o	perations necessitated	change in control meas	ures		
		Average benchmark	k value exceedance			•	
		Other (describe):					
4.	Briefly o	describe the nature o	f the problem identified	d:			
5.	Date pr	oblem identified:					
6.	How pro	oblem was identified:					
		Comprehensive site	inspection	×		,i	
		Quarterly visual ass	essment				
		Routine facility insp	ection				
		Notification by EPA	or DEC				-
		Other (describe):					
7.	Descript modifica determi	ations or repairs to co	on(s) taken or to be tak ontrol measures, analys	en to eliminate or furtl is to be conducted, etc	ner investigate th) or if no modific	ne problem (e.g., de cation is needed, ba	escribe asis for that
8.	Did/will	this corrective action	require modification o	of your SWPPP?] Yes [No	

For Agency Use

	Permit Tracking #:
9. Date corrective action initiated:	
10. Date corrective action completed: Or expected to	o be completed:
11. If corrective action not yet completed, provide the status of the corrective action inspections and describe any remaining steps (including timeframes associated corrective action:	on as the time of the comprehensive site with each step) necessary to complete the
Section V. Annual Report Certification	
Compliance Certification	
Do you certify that your annual inspection has met the requirements of Part 6.3 of that, based upon the results of this inspection, to the best of your knowledge, you a compliance with the permit?	the permit, and are in Yes No
If NO, summarize why you are not in compliance with the permit: Municipality of Anchorage Facilities are not regulated under concernit, but by its MS4 instead.	ditions set forth by the Multi-sector
Annual Report Certification	
I certify under penalty of law that this document and all attachments were prepare accordance with a system designed to assure that qualified personnel properly gat Based on my inquiry of the person or persons who manage the system, or those perinformation submitted is, to the best of my knowledge and belief, true, accurate, a significant penalties for submitting false information, including the possibility of fin	her and evaluate the information submitted. erson directly responsible for gathering the and complete. I am aware that there are
	eric.hodgson@anchorageak.gov
Name of Authorized Representative Title	Email
Signature	12/6/2023 Date Signed



Alaska Department of Environmental Conservation MSGP Annual Reporting Form

Section I. General Informatio	n				74-				
Facility Name				APDES Perm	nit Tracking	g Number			
	Snow Disposa	l Site							
Facility Physical Address									
Street		City				State	Zip Code		
10,000 Block of East 100th			Anchorage			Alaska	99502		
Contact Person	Title		Phone		mail				
Eric Hodgson		rintendent	(907) 343		eric.ł		nchorageak.gov		
Lead Inspector's Name	Additional Inspect		Additional Inspe	ctor's Name		Inspection Da			
Riddick Proveaux	Dustin F	Richmond				1	1/21/2023		
Section II. General Inspection Findings									
 As part of this comprehensive site inspection, did you inspect all potential pollutant sources, including areas where industrial activity may be exposed to storm water? If NO, describe why not: Yes No 									
	-		, -						
Note : Complete Section III of this form parts 2 and 3 below, where pollutant	n for each indust	rial activity area insp d to storm water	ected and incl	uded in you	SWPPP	or as newly de	fined, in Section II		
Did this inspection identify an identified in your SWPPP? If YES, for each location, demeasures in place:	ny storm water	or non-storm wate	a ∈		L	Yes s and any asso	No		

	Permit Tracking #:
3.	Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP?
	If YES, describe these sources of storm water or non-storm water pollutants expected to be present in these discharges, and any control measures in place:
4.	Did you review storm water monitoring data as part of this Yes No. NA, no monitoring
	If YES, summarize the findings of that review and describe any additional inspection activities resulting from this review:
5.	Describe any evidence of pollutants entering the drainage system or discharging to surface waters, and the condition of and around outfalls, including flow dissipation measure to prevent scouring:
\ A /*	
and	nter conditions with snow and ice were present at the time of the inspection. All outfalls, ponds, don-site drainage system were frozen at this time. Prior to these winter conditions a routine
ins	pection was performed recently. The routine inspection showed that there were no evidence of
	lutants entering or leaving the drainage system and all control measures were functioning per /PPP plans and designs.
6	Have you taken or do you plan to take corrective estimates as a self-ed in Dark 9 of the country
6.	Have you taken or do you plan to take corrective actions, as specified in Part 8 of the permit, since your last annual report submission (or since you received authorization to discharge Yes Yes No
	under this permit if this is your first annual report), including any corrective actions identified as a result of this annual comprehensive site inspection?
	If YES, how many conditions requiring review for corrective action as specified in Parts 8.1 and 8.2 of the MSGP were addressed by these corrective actions?
Note	e: Complete the attached Corrective Action Form (Section IV) for each condition identified, including any conditions identified as a result of

MSGP Annual Report (Oct 2020) Page 2 of 8

this comprehensive storm water inspection.

Section III. Industrial Activity Area Specific Findings						
Complete one block for each industrial activity area where pollutants may be exposed to storm water. Copy this page for additional industrial activity areas.						
In reviewing each area, you should consider:						
 Industrial materials, residue, or trash that may have or could come into contact with storm water; Leaks or spills from industrial equipment, drums, tanks, and other containers; 						
Offsite tracking of industrial or waste materials from areas of no exposure to exposed areas; and						
Tracking or blowing of raw, final, or waste material from areas of no exposure to exposed areas.						
Industrial Activity Area: RAP Access Roads						
1. Brief Description:						
There are two RAP Access Roads, one running north of the site and the other running south of site. These access roads have heavy equipment traveling on them frequently during facility operations. Snow and ice were present at time of the inspection. The north access road was not being utilized at this time and the access gate was locked. North Access road has not been cleared of heavy snow. The South access road was being used at this time by heavy equipment, the road has been cleared and maintained. No signs of pollutants of tracking was observed at this time.						
2. Are any control measures in need of maintenance or repair?	No					
3. Have any control measures failed and require replacement?	No					
4. Are any additional/revised control measures necessary in this area?	No					
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be the attached Corrective Action Form.)	e described on					
Industrial Activity Area: Snow Disposal Pad 1. Brief Description:						
The Snow disposal pad is exposed to potential pollutants from heavy equipment traveling and working in the pads area during daily operations. Winter conditions are present at this time with snow and ice on the site. The Disposal Pad has been cleared of heavy snow and is allowing access of heavy equipment to correctly stockpile snow at site #1 in the correct stockpile sequence per SWPPP plans and design. No pollutants observed at this time.						
2. Are any control measures in need of maintenance or repair?	No					
3. Have any control measures failed and require replacement? Yes	No					
4. Are any additional/revised control measures necessary in this area?	No					
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be the attached Corrective Action Form.)	described on					

MSGP Annual Report (Oct 2020) Page 3 of 8

Industrial Activity Area: Wood Lot (Laurel Acres)					
1. Brief Description:					
The Wood Lot is in primary use during summer and spring time operations. The lot appeared to still be active with the the stockpile area cleared of heavy snow. A stockpile of wood and mulch was present on site and was properly stockpiled per SWPPP plans. There was no evidence of pollutants leaving eh area at this time.					
2. Are any control measures in need of maintenance or repair?					
3. Have any control measures failed and require replacement? Yes Vo					
4. Are any additional/revised control measures necessary in this area? Yes Vo					
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)					
Industrial Activity Area: Sedimentation Ponds #1 and #2					
1. Brief Description:					
Sedimentation ponds #1 and #2 receive runoff from Disposal pad and access roads which have potential pollutants from heavy equipment and snow disposal. At time of this inspection both ponds were covered in snow and frozen. Prior to these freezing conditions there was a routine inspection that was performed recently. The routine inspection showed that there was no evidence of pollutants and is functioning per SWPPP plans and designs					
2. Are any control measures in need of maintenance or repair?					
3. Have any control measures failed and require replacement? Yes Vo					
4. Are any additional/revised control measures necessary in this area? Yes Vo					
If YES, to any of these three questions, provide a description of the problem: (Any necessary corrective actions should be described on the attached Corrective Action Form.)					
ı					

MSGP Annual Report (Oct 2020)

Industrial Activity Area: Staging Area						
1. Brief Description:						
With snow present at time of inspection a front end loader with a plow attached was in operation moving snow around on the snow disposal pad. The staging area for this equipment had no signs of pollutants at this time.						
2. Are any control measures in need of maintenance or repair?		Yes	√	No		
3. Have any control measures failed and require replacement?		Yes	\checkmark	No		
4. Are any additional/revised control measures necessary in this area?		Yes	√	No		
If YES, to any of these three questions, provide a description of the problem: (Any necessal the attached Corrective Action Form.)	y correct	tive actions	should	be described o		
		05-				
Industrial Activity Area: Temporary Street Sweeper Waste Disposal Area						
Brief Description:						
Temporary Street Sweeper Waster Disposal Area is primary utilized during the summer and spring time operations. During the winter time this area is traveled across by heavy equipment. There was no street sweeper waste stockpile present at time of inspection. There are no pollutants observed at this time.						
Are any control measures in need of maintenance or repair?		Yes	\checkmark	No		
3. Have any control measures failed and require replacement?		Yes	√	No		
4. Are any additional/revised control measures necessary in this area?		Yes	√	No		
If YES, to any of these three questions, provide a description of the problem: (Any necessar the attached Corrective Action Form.)	y correct	ive actions	should l	e described o		

	Industrial Activity Area: Vegetative Buffer Strip				
1. Brief Description:					
The vegetative Buffer Strip receives runoff from the snow disposal pad and runoff between ponds. Heavy snow and ice was present and covered area at time of inspection. Prior to these winter conditions a routine inspection was recently performed. The routine inspection showed no evidence of pollutants and was functioning per SWPPP plans.					
2.	Are any control measures in need of maintenance or repair?		Yes	√	No
3.	Have any control measures failed and require replacement?		Yes	\checkmark	No
4.	Are any additional/revised control measures necessary in this area?		Yes	\checkmark	No
	If YES, to any of these three questions, provide a description of the problem: (Any necessary the attached Corrective Action Form.)	correc	tive actio	ns should l	be described on
		**			~
Ind	ustrial Activity Area:				
1.	Brief Description:				
2.	Are any control measures in need of maintenance or repair?		Yes		No
2.	Are any control measures in need of maintenance or repair? Have any control measures failed and require replacement?		Yes		No No
3.	Have any control measures failed and require replacement?	correct	Yes Yes		No No
3.	Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary	correct	Yes Yes	ns should b	No No
3.	Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary	correct	Yes Yes	ns should E	No No
3.	Have any control measures failed and require replacement? Are any additional/revised control measures necessary in this area? If YES, to any of these three questions, provide a description of the problem: (Any necessary	correct	Yes Yes	ns should b	No No

	ection IV. Corrective Actions					
Complete this page for each specific condition requiring a corrective action or a review determining that no corrective action is needed. Copy this page for additional corrective actions or reviews.						
Inc	Include both corrective actions that have been initiated or completed since the last annual report, and future corrective actions needed to					
ade	address problems identified in the comprehensive storm water inspection. Include an update on any outstanding corrective actions that had not been completed at the time of your previous annual report.					
1.	Corrective Action # 0 of 0 for this reporting period.					
2.	Is this corrective action:					
	An update on a corrective action from a previous annual report; or					
	A new corrective action?					
3.	Identify the condition(s) triggering the need for this review:					
	Unauthorized release of discharge					
	Numeric effluent limitation exceedance					
	Control measures inadequate to meet applicable water quality standards					
	Control measures inadequate to meet non-numeric effluent limitations					
	Control measures not properly operated or maintained					
	Change in facility operations necessitated change in control measures					
	Average benchmark value exceedance					
	Other (describe):					
4.	Briefly describe the nature of the problem identified:					
5.	Date problem identified:					
6.	How problem was identified:					
	Comprehensive site inspection					
	Quarterly visual assessment					
	Routine facility inspection					
	Notification by EPA or DEC					
	Other (describe):					
7.	Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that determination.					
8.	Did/will this corrective action require modification of your SWPPP? Yes No					
7.	Notification by EPA or DEC Other (describe): Description of corrective action(s) taken or to be taken to eliminate or further investigate the problem (e.g., describe modifications or repairs to control measures, analysis to be conducted, etc.) or if no modification is needed, basis for that					
8.	Did/will this corrective action require modification of your SWPPP?					

Date corrective action initiated:	· · · · · · · · · · · · · · · · · · ·				
10. Date corrective action completed:	Or expected to k	pe completed:			
11. If corrective action not yet completed, provide the status of the corrective action as the time of the comprehensive site inspections and describe any remaining steps (including timeframes associated with each step) necessary to complete the corrective action:					
Section V. Annual Report Certification					
Compliance Certification					
Do you certify that your annual inspection has me					
that, based upon the results of this inspection, to	the best of your knowledge, you are	e in 🗸 Yes 🗌 No			
compliance with the permit? If NO, summarize why you are not in complia	non viale also moneria.				
ii NO, summarize why you are not in compila	nce with the permit:				
Municipality of Anchorage Facilities ar permit, but by its MS4 instead.	e not regulated under condi	tions set forth by the Multi-sector			
Annual Report Certification					
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 assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					
Eric Hodgson	Superintendent	eric.hodgson@anchorageak.gov			
Name of Authorized Representative	Ťitle ,	Email			
3-4		12/6/2023			
Signature		Date Signed			