For Agency Use
Permit Tracking #: AKS-052558

Alaska Department of Environmental Conservation
MSGP Annual Reporting Form

Section I. General Information

Facility Name	APDES Permit Tracking Number
ANCHORAGE MAINTANCE STATION	AKS-052558

Facility Physical Address

Street	City	State	Zip Code
5300 e tudor rd	Anchorage	Alaska	99507

Contact Person	Title	Phone	Email
Renee Goentzel	Enviro Analyst III	269-0714	renee.goentzel@alaska.gov

Lead Inspector's Name	Additional Inspector's Name	Additional Inspector's Name	Inspection Date
Steven Church			4/4/23

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? ☑ Yes ☐ No

   If NO, describe why not:

***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 any storm water or non-storm water outfalls not previously identified in your SWPPP? ☐ Yes ☑ No

   If YES, for each location, describe the sources of those storm water and non-storm water discharges and any associated control measures in place:

3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? ☐ 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? ☐ Yes ☑ No ☑ NA, no monitoring performed

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:

No Pollutants Seen at Outfall A

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? ☑ Yes ☒ No

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: South East corner

1. Brief Description: Fuel / Yard Exit

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: Station

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: Back 40

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: Sand Storage

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.)*

Section 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.

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 been completed at the time of your previous annual report.

1. Corrective Action # 1 of 1 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:
   ~~wattets~~ SAC oil Boom Need Replacement after winter

5. Date problem identified: 4/4/23

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.
   Replace with new

8. Did/will this corrective action require modification of your SWPPP? ☐ Yes ☑ No

9. Date corrective action initiated: SDL 4/24/23

10. Date corrective action completed: Or expected to be completed: 5/22/23

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: Snow in Drain

Section V. Annual Report Certification

Compliance Certification

Do you certify that your annual inspection has met the requirements of Part 6.3 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? ☑ Yes ☐ No

If NO, summarize why you are not in compliance with the permit:

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.

Name of Authorized Representative	Title	Email
Steven Church	Supp Inspector	Steven.Church@Alaska.gov

Signature

Date Signed: 4/4/23

Anchorage Maintenance Station Annual SPCC Inspection

The annual inspection must be completed each year with an individual evaluation of each storage tank. Deficiencies are to be addressed promptly. Provide further description and comments, if necessary, on a separate sheet of paper and attach to this sheet. The inspection checklist is to be kept with the SPCC plan.

Date: 4/4/23	**Time:** 10:20	**Inspector:** Steven Church

✓ = Satisfactory N/A = Not Applicable R = Repair required

	Facility Drainage		**Training**
✓	No trash or debris under or near tank(s)	✓	New employees trained on spill prevention & response
✓	No erosion or stressed/dead vegetation under or near tank(s)	✓	All SPCC-related trainings are properly recorded
✓	No standing water under or around tank(s)		
✓	No woody vegetation under or near tanks		
✓	No sheen where water goes off-site		

	Security		**Fuel Transfer Area**
	Fence, gates, and locks operational, if any		Emergency shut off valve operational (test)
✓	Bollards/tank barriers not damaged	✓	Concrete or secondary containment is under tank dispenser(s)
✓	Tank dispenser(s) locked or starter controls turned off when tank is not in use	✓	No leaks or cracks in dispenser hose(s) or handle(s)
✓	Lighting is working properly	✓	No new staining or oil sheen on ground (if sheen, wipe up with an absorbent pad)
✓	Sign on fence to keep out trespassers is legible		

	Indoor Storage Areas
✓	No spotting or staining on floor (clean-up if present); place pads under all dispensers
✓	All containers are labeled properly (contents)
✓	Drum storage has secondary containment with no liquid or debris
✓	Floors are clean and free of debris
✓	Lids on drums are securely closed (must be closed unless actively being used)
✓	No open containers with fluid in them
✓	Oil/Water separator does not have heavy oil sheen (use absorbent pads to remove)

Comments:

Above Ground Storage Tank #1 (10,000 gallon)	
✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other tank fittings
✓	Tank foundation checked for cracks, erosion, settling, deterioration, buckling, or damage
✓	Vent(s) not obstructed
✓	Level gauges and alarms tested and operative
✓	Tank contents clearly labeled on tank
✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')
✓	Hazard placards are intact and readable
✓	Tank marked with a distinctive, legible number (e.g. #1)

Above Ground Storage Tank #2 (120 gallon)	
✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other fittings connecting to tank
✓	Pressure gauge operative
✓	Vent(s) not obstructed
	Tank contents clearly labeled on tank
	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')
	Hazard placards are intact and readable
	Tank marked with a distinctive, legible number (e.g. #1)

Above Ground Storage Tank #3 (107 gallon)	
✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other fittings connecting to tank
✓	Pressure gauge operative
✓	Vent(s) not obstructed
✓	Tank contents clearly labeled on tank
✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')
✓	Hazard placards are intact and readable
✓	Tank marked with a distinctive, legible number (e.g. #1)

Above Ground Storage Tank #4 (multi-fluid)	
✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other fittings connecting to tank
✓	Tank foundation checked for cracks, erosion, settling, deterioration, or damage
✓	Tank contents clearly labeled on tank
✓	Tank fluid quantity clearly labeled (e.g. '300 gallons')
✓	Hazard placards are intact and readable
✓	Tank marked with a distinctive, legible number (e.g. #4)

Remarks:

#5 55 Gallon Drums		Hazardous Waste Storage Area (HWSA) - fill out only if storing hazardous waste	
✓	Drum surfaces checked for signs of leakage or drips (no significant rusting, corrosion, discoloration, etc.)	✓	Containers on secondary containment (concrete pad or portable plastic containment)
9	General drum condition (F) fair, (G) good or (E) excellent	✓	Hazardous Waste Determination Forms current, if storing hazardous waste
✓	Lids on drums are securely closed (must be closed unless actively being used)	✓	Containers marked properly (material type and date)
✓	Drum storage has secondary containment with no liquid or debris	✓	Lids securely on containers unless they are being actively used
✓	Drums stored inside or under cover	✓	36 inches between containers
✓	Used fluids being disposed of regularly (not an excess of drums in the facility)	✓	Containers not rusted through, cracked, or have holes
✓	All containers are marked properly (with contents and date filled)	N/A	Manifest Log is current (if transporting hazardous waste)
		N/A	Limited access sign readable
		N/A	HWSA Log current
		N/A	HWSA is secure (fenced and/or locked)

Remarks:

Birchwood Maintenance Station Annual SPCC Inspection

The annual inspection must be completed each year with an individual evaluation of each storage tank. Deficiencies are to be addressed promptly. Provide further description and comments, if necessary, on a separate sheet of paper and attach to this sheet. The inspection checklist is to be kept with the SPCC plan.

Date: 4/4/23	Time: 8:45 AM	Inspector: Steven Church

✓ = Satisfactory N/A = Not Applicable R = Repair required

	Facility Drainage
✓	No trash or debris under or near tank(s)
✓	No erosion or stressed/dead vegetation under or near tank(s)
✓	No standing water under or around tank(s)
✓	No woody vegetation under or near tanks
✓	No sheen where water goes off-site

	Training
✓	New employees trained on spill prevention & response
✓	All SPCC-related trainings are properly recorded

	Security
✓	Fence, gates, and locks operational, if any
✓	Bollards/tank barriers not damaged
✓	Tank dispenser(s) locked or starter controls turned off when tank is not in use
✓	Lighting is working properly
✓	Sign on fence to keep out trespassers is legible

	Fuel Transfer Area
✓	Emergency shut off valve operational (test)
✓	Concrete or secondary containment is under tank dispenser(s)
✓	No leaks or cracks in dispenser hose(s) or handle(s)
✓	No new staining or oil sheen on ground (if sheen, wipe up with an absorbent pad)

	Indoor Storage Areas
✓	No spotting or staining on floor (clean-up if present); place pads under all dispensers
✓	All containers are labeled properly (contents)
✓	Drum storage has secondary containment with no liquid or debris
✓	Floors are clean and free of debris
✓	Lids on drums are securely closed (must be closed unless actively being used)
✓	No open containers with fluid in them
✓	Oil/Water separator does not have heavy oil sheen (use absorbent pads to remove)

Comments:

Above Ground Storage Tank #1 (4,000 gallon)		Above Ground Storage Tank #2 (multi-fluid)	
✓	Tank surfaces checked for signs of leakage or drips	✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated	✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted	✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other tank fittings	✓	No leaks at valves, flanges, seals or other fittings connecting to tank
✓	Tank foundation checked for cracks, erosion, settling, deterioration, buckling, or damage	✓	Vent is not obstructed
✓	Vent(s) not obstructed		Tank contents clearly labeled on tank
✓	Level gauges and alarms tested and operative	✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')
✓	Tank contents clearly labeled on tank	✓	Hazard placards are intact and readable
✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')	✓	Tank marked with a distinctive, legible number (e.g. #1)
✓	Hazard placards are intact and readable		
✓	Tank marked with a distinctive, legible number (e.g. #1)		

#3 55 Gallon Drums (main shop)		#4 55 Gallon Drums (warm storage)	
✓	Drum surfaces checked for signs of leakage or drips (no significant rusting, corrosion, discoloration, etc.)	✓	Drum surfaces checked for signs of leakage or drips (no significant rusting, corrosion, discoloration, etc.)
✓	General drum condition (F) fair, (G) good or (E) excellent	G	General drum condition (F) fair, (G) good or (E) excellent
✓	Lids on drums are securely closed (must be closed unless actively being used)	✓	Lids on drums are securely closed (must be closed unless actively being used)
✓	Drum storage has secondary containment with no liquid or debris	✓	Drum storage has secondary containment with no liquid or debris
✓	Drums stored inside or under cover	✓	Drums stored inside or under cover
✓	Used fluids being disposed of regularly (not an excess of drums in the facility)	✓	Used fluids being disposed of regularly (not an excess of drums in the facility)
✓	All containers are marked properly (with contents and date filled)	✓	All containers are marked properly (with contents and date filled)

Remarks:

Hazardous Waste Storage Area (HWSA) - fill out only if storing hazardous waste	
	Containers on secondary containment (concrete pad or portable plastic containment)
	Hazardous Waste Determination Forms current, if storing hazardous waste
	Containers marked properly (material type and date)
	Lids securely on containers unless they are being actively used
	36 inches between containers
	Containers not rusted through, cracked, or have holes
	Manifest Log is current (if transporting hazardous waste)
	Limited access sign readable
	HWSA Log current
N/A	HWSA is secure (fenced and/or locked)

Remarks:

For Agency Use
Permit Tracking #: AKS-052558

Alaska Department of Environmental Conservation
MSGP Annual Reporting Form

Section I. General Information

Facility Name			APDES Permit Tracking Number	
DOT&PF Birchwood Maintenance Station and Birchwood Airport			AKS-052558	
Facility Physical Address				
Street	City		State	Zip Code
20651 Birchwood Spur Road	Chugiak		Alaska	99567
Contact Person	Title	Phone	Email	
Renée Goentzel	Environmental Analyst III	(907) 269-0714	renee.goentzel@alaska.gov	
Lead Inspector's Name	Additional Inspector's Name	Additional Inspector's Name	Inspection Date	
Steven Church			4/4/23	

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? ☑ Yes ☐ No

   If NO, describe why not:

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 any storm water or non-storm water outfalls not previously identified in your SWPPP? ☐ Yes ☑ No

   If YES, for each location, describe the sources of those storm water and non-storm water discharges and any associated control measures in place:

3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? ☐ 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? ☐ Yes ☐ No ☑ NA, no monitoring performed

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:

Clean no Pollutants observed and No Outfalls

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? ☐ Yes ☑ No

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: North yard

1. Brief Description: Rear parking Area

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: Station

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: Air port		
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.)*		

Section 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.

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 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

9. Date corrective action initiated:

10. Date corrective action completed: Or expected to be 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 met the requirements of Part 6.3 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? ☑ Yes ☐ No

If NO, summarize why you are not in compliance with the permit:

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.

Name of Authorized Representative	Title	Email
Steven Church	Supp Inspector	Steven.Church@Alaska.gov

Signature

4/4/23
Date Signed

Birchwood Maintenance Station Annual SPCC Inspection

The annual inspection must be completed each year with an individual evaluation of each storage tank. Deficiencies are to be addressed promptly. Provide further description and comments, if necessary, on a separate sheet of paper and attach to this sheet. The inspection checklist is to be kept with the SPCC plan.

Date: 4/4/23	Time: 8:45 AM	Inspector: Steven Church

✓ = Satisfactory N/A = Not Applicable R = Repair required

	Facility Drainage
✓	No trash or debris under or near tank(s)
✓	No erosion or stressed/dead vegetation under or near tank(s)
✓	No standing water under or around tank(s)
✓	No woody vegetation under or near tanks
✓	No sheen where water goes off-site

	Training
✓	New employees trained on spill prevention & response
✓	All SPCC-related trainings are properly recorded

	Security
✓	Fence, gates, and locks operational, if any
✓	Bollards/tank barriers not damaged
✓	Tank dispenser(s) locked or starter controls turned off when tank is not in use
✓	Lighting is working properly
✓	Sign on fence to keep out trespassers is legible

	Fuel Transfer Area
✓	Emergency shut off valve operational (test)
✓	Concrete or secondary containment is under tank dispenser(s)
✓	No leaks or cracks in dispenser hose(s) or handle(s)
✓	No new staining or oil sheen on ground (if sheen, wipe up with an absorbent pad)

	Indoor Storage Areas
✓	No spotting or staining on floor (clean-up if present); place pads under all dispensers
✓	All containers are labeled properly (contents)
✓	Drum storage has secondary containment with no liquid or debris
✓	Floors are clean and free of debris
✓	Lids on drums are securely closed (must be closed unless actively being used)
✓	No open containers with fluid in them
✓	Oil/Water separator does not have heavy oil sheen (use absorbent pads to remove)

Comments:

Above Ground Storage Tank #1 (4,000 gallon)		Above Ground Storage Tank #2 (multi-fluid)	
✓	Tank surfaces checked for signs of leakage or drips	✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated	✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted	✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other tank fittings	✓	No leaks at valves, flanges, seals or other fittings connecting to tank
✓	Tank foundation checked for cracks, erosion, settling, deterioration, buckling, or damage	✓	Vent is not obstructed
✓	Vent(s) not obstructed		Tank contents clearly labeled on tank
✓	Level gauges and alarms tested and operative	✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')
✓	Tank contents clearly labeled on tank	✓	Hazard placards are intact and readable
✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')	✓	Tank marked with a distinctive, legible number (e.g. #1)
✓	Hazard placards are intact and readable		
✓	Tank marked with a distinctive, legible number (e.g. #1)		

#3 55 Gallon Drums (main shop)		#4 55 Gallon Drums (warm storage)	
✓	Drum surfaces checked for signs of leakage or drips (no significant rusting, corrosion, discoloration, etc.)	✓	Drum surfaces checked for signs of leakage or drips (no significant rusting, corrosion, discoloration, etc.)
✓	General drum condition (F) fair, (G) good or (E) excellent	G	General drum condition (F) fair, (G) good or (E) excellent
✓	Lids on drums are securely closed (must be closed unless actively being used)	✓	Lids on drums are securely closed (must be closed unless actively being used)
✓	Drum storage has secondary containment with no liquid or debris	✓	Drum storage has secondary containment with no liquid or debris
✓	Drums stored inside or under cover	✓	Drums stored inside or under cover
✓	Used fluids being disposed of regularly (not an excess of drums in the facility)	✓	Used fluids being disposed of regularly (not an excess of drums in the facility)
✓	All containers are marked properly (with contents and date filled)	✓	All containers are marked properly (with contents and date filled)

Remarks:

Hazardous Waste Storage Area (HWSA) - fill out only if storing hazardous waste	
	Containers on secondary containment (concrete pad or portable plastic containment)
	Hazardous Waste Determination Forms current, if storing hazardous waste
	Containers marked properly (material type and date)
	Lids securely on containers unless they are being actively used
	36 inches between containers
	Containers not rusted through, cracked, or have holes
	Manifest Log is current (if transporting hazardous waste)
	Limited access sign readable
	HWSA Log current
N/A	HWSA is secure (fenced and/or locked)

Remarks:

For Agency Use
Permit Tracking #: AKS-052558

Alaska Department of Environmental Conservation
MSGP Annual Reporting Form

Section I. General Information

Facility Name			APDES Permit Tracking Number	
DOT&PF Girdwood Maintenance Station and Girdwood Airport			AKS-052558	
Facility Physical Address				
Street	City		State	Zip Code
388 Toadstool Drive	Girdwood		Alaska	99587
Contact Person	Title	Phone	Email	
Renée Goentzel	Environmental Analyst III	(907) 269-0714	renee.goentzel@alaska.gov	
Lead Inspector's Name	Additional Inspector's Name	Additional Inspector's Name	Inspection Date	
Paul Bertholl	N/A		4/26/2023	

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? ☒ Yes ☐ No

   If NO, describe why not:

***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 any storm water or non-storm water outfalls not previously identified in your SWPPP? ☐ Yes ☒ No

   If YES, for each location, describe the sources of those storm water and non-storm water discharges and any associated control measures in place:

3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? ☐ 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? ☐ Yes ☐ No ☒ NA, no monitoring performed

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: ~~N/A~~ No pollutants in drainage system. outfall A looks good and free of Debis.

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? ☐ Yes ☒ No

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: Southeast Corner

1. Brief Description:

The Southeast corner is the only outfall from the site. Water enters the outfall area and flows through ~~wattles~~ before entering the discharge culvert

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: South End

1. Brief Description:

There South end has no outfalls in this area. There is a berm as the BMP along the fence line. BMP is working well.

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: South west Side

1. Brief Description: Entrance to the Facility and main traffic area. There is a berm and ditch along this area, The berm and ditch are working well

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: Northend

1. Brief Description: Supply Storeage area and Equipment parking area. The Northend has natural BMP's which consist of a hillsides. The BMP's are working well.

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.)*

Section 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.

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 been completed at the time of your previous annual report.

1. Corrective Action # ___ of ___ 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

9. Date corrective action initiated:

10. Date corrective action completed: Or expected to be 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 met the requirements of Part 6.3 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? ☒ Yes ☐ No

If NO, summarize why you are not in compliance with the permit:

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.

Name of Authorized Representative	Title	Email
Paul Bertholl	Foreman	Paul.bertholl@alaska.gov

Paul Bertholl
Signature

4/26/2023
Date Signed

Girdwood SPCC Annual Inspection

The annual inspection must be completed each year with an individual evaluation of each storage tank. Deficiencies are to be addressed promptly. Provide further description and comments, if necessary, on a separate sheet of paper and attach to this sheet. The inspection checklist is to be kept with the SPCC plan.

Date: 4/18/2023	**Time:** 9:00 AM	**Inspector:** Paul Bertholl

✓ = Satisfactory N/A = Not Applicable R = Repair required

	Facility Drainage		**Training**
✓	No trash or debris under or near tank(s)	✓	New employees trained on spill prevention & response
✓	No erosion or stressed/dead vegetation under or near tank(s)	✓	All SPCC-related trainings are properly recorded
✓	No standing water under or around tank(s)		
✓	No woody vegetation under or near tanks		
✓	No sheen where water goes off-site		

	Security		**Fuel Transfer Area**
✓	Fence, gates, and locks operational, if any	✓	Emergency shut off valve operational (test)
✓	Bollards/tank barriers not damaged	✓	Concrete or secondary containment is under tank dispenser(s)
✓	Tank dispenser(s) locked or starter controls turned off when tank is not in use	✓	No leaks or cracks in dispenser hose(s) or handle(s)
✓	Lighting is working properly	✓	No new staining or oil sheen on ground (if sheen, wipe up with an absorbent pad)
✓	Sign on fence to keep out trespassers is legible		

	Indoor Storage Areas
✓	No spotting or staining on floor (clean-up if present); place pads under all dispensers
✓	All containers are labeled properly (contents)
✓	Drum storage has secondary containment with no liquid or debris
✓	Floors are clean and free of debris
✓	Lids on drums are securely closed (must be closed unless actively being used)
✓	No open containers with fluid in them
✓	Oil/Water separator does not have heavy oil sheen (use absorbent pads to remove)

Comments:

Above Ground Storage Tank #1 (4,000 gal.)	
✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other tank fittings
✓	Tank foundation checked for cracks, erosion, settling, deterioration, buckling, or damage
✓	Vent(s) not obstructed
✓	Level gauges and/or alarms tested and operative
✓	Tank contents clearly labeled on tank
✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')
✓	Hazard placards are intact and readable
✓	Tank marked with a distinctive, legible number (e.g. #1)

Above Ground Storage Tank #2 (100 gal.)	
✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other tank fittings
✓	Vent(s) not obstructed
✓	Tank contents clearly labeled on tank
✓	Tank fluid quantity clearly labeled (e.g. '10,000 gallons')
✓	Hazard placards are intact and readable
✓	Tank marked with a distinctive, legible number (e.g. #1)
✓	Tank surfaces checked for signs of leakage or drips

Above Ground Storage Tank #3 (multi-fluid	
✓	Tank surfaces checked for signs of leakage or drips
✓	Tank is not damaged, significantly rusted, or deteriorated
✓	Bolts, rivets, pipes, seams, and hoses are not damaged, cracked, or significantly rusted
✓	No leaks at valves, flanges, seals or other fittings connecting to tank
✓	Tank foundation checked for cracks, erosion, settling, deterioration, or damage
✓	Tank contents clearly labeled on tank
✓	Tank fluid quantity clearly labeled (e.g. '300 gallons')
✓	Hazard placards are intact and readable
✓	Tank marked with a distinctive, legible number (e.g. #4)

#4 55 Gallon Drums (main shop)	
✓	Drum surfaces checked for signs of leakage or drips (no significant rusting, corrosion, discoloration, etc.)
G	General drum condition (F) fair, (G) good or (E) excellent
✓	Lids on drums are securely closed (must be closed unless actively being used)
✓	Drum storage has secondary containment with no liquid or debris
✓	Drums stored inside or under cover
✓	Used fluids being disposed of regularly (not an excess of drums in the facility)
✓	All containers are marked properly (with contents and date filled)

Comments:

TCH

#5 55 Gallon Drums (Quonset Hut)		Hazardous Waste Storage Area (HWSA) - fill out only if storing hazardous waste	
✓	Drum surfaces checked for signs of leakage or drips (no significant rusting, corrosion, discoloration, etc.)	N/A	Containers on secondary containment (concrete pad or portable plastic containment)
G	General drum condition (F) fair, (G) good or (E) excellent		Hazardous Waste Determination Forms current, if storing hazardous waste
✓	Lids on drums are securely closed (must be closed unless actively being used)		Containers marked properly (material type and date)
✓	Drum storage has secondary containment with no liquid or debris		Lids securely on containers unless they are being actively used
✓	Drums stored inside or under cover		36 inches between containers
✓	Used fluids being disposed of regularly (not an excess of drums in the facility)		Containers not rusted through, cracked, or have holes
✓	All containers are marked properly (with contents and date filled)		Manifest Log is current (if transporting hazardous waste)
			Limited access sign readable
			HWSA Log current
		✓	HWSA is secure (fenced and/or locked)

Remarks:

For Agency Use
Permit Tracking #: AKS-052558

Alaska Department of Environmental Conservation
MSGP Annual Reporting Form

Section I. General Information

Facility Name			APDES Permit Tracking Number	
DOT&PF O'Malley Rd Snow Storage and Disposal Site			AKS-052558	
Facility Physical Address				
Street	City		State	Zip Code
10675 Old Seward Hwy	Anchorage		Alaska	99515
Contact Person	Title	Phone	Email	
Renée Goentzel	Environmental Analyst III	(907) 269-0714	renee.goentzel@alaska.gov	
Lead Inspector's Name	Additional Inspector's Name	Additional Inspector's Name	Inspection Date	
Steven Chmura			7/6/23	

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? ☒ Yes ☐ No

   If NO, describe why not:

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 any storm water or non-storm water outfalls not previously identified in your SWPPP? ☐ Yes ☒ No

   If YES, for each location, describe the sources of those storm water and non-storm water discharges and any associated control measures in place:

3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? ☐ 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? ☐ Yes ☐ No ☒ NA, no monitoring performed

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:

Due to excessive snow, some silt overwhelmed the cattles and rock and some Litter got in and around the sediment cage at outfall A.

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? ☒ Yes ☐ No

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? N/A

***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: Snow Site

1. Brief Description: outfall A

Drain overwhelmed due to amount of snowmelt and Rain

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: outfall B

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.)*

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.)*

Section 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.

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 been completed at the time of your previous annual report.

1. Corrective Action # 1 of 1 for this reporting period.

2. Is this corrective action:
   - [x] 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
   - [x] Other (describe): this years excessive snow overwhelmed the BmP's which usually work

4. Briefly describe the nature of the problem identified:

   wattles overwhelmed, rock has too much silt, and litter is in sediment cage

5. Date problem identified:

6. How problem was identified:
   - [ ] Comprehensive site inspection
   - [ ] Quarterly visual assessment
   - [ ] Routine facility inspection
   - [ ] Notification by EPA or DEC
   - [x] Other (describe): may site visit 5/11/23

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.

   Replace wattles, Pickup litter, clean sediment cage, and clean/Replace rock around cage

8. Did/will this corrective action require modification of your SWPPP? [ ] Yes [x] No

9. Date corrective action initiated: Litter 5/11 everything else 8/21/23

10. Date corrective action completed: 8/22/23 Or expected to be 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:

Had to wait for enough snow to melt to be able to get in to Replace BMP's

Section V. Annual Report Certification

Compliance Certification

Do you certify that your annual inspection has met the requirements of Part 6.3 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? ☒ Yes ☐ No

If NO, summarize why you are not in compliance with the permit:

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.

Name of Authorized Representative	Title	Email
Steveen Church	Swpp Inspector	Steven.Church@Alaska.gov

Signature	Date Signed
	7/6/23

For Agency Use
Permit Tracking #: AKS-062558

Alaska Department of Environmental Conservation
MSGP Annual Reporting Form

Section I. General Information

Facility Name		APDES Permit Tracking Number	
DOT&PF Hiland Road Snow Storage and Disposal Site		AKS-052558	
Facility Physical Address			
Street	City	State	Zip Code
8500 Hiland Road	Eagle River	Alaska	99577

Contact Person	Title	Phone	Email
Renée Goentzel	Environmental Analyst III	(907) 269-0714	renee.goentzel@alaska.gov

Lead Inspector's Name	Additional Inspector's Name	Additional Inspector's Name	Inspection Date
Steve Church			7/6/23

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? ☒ Yes ☐ No

   If NO, describe why not:

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 any storm water or non-storm water outfalls not previously identified in your SWPPP? ☐ Yes ☒ No

   If YES, for each location, describe the sources of those storm water and non-storm water discharges and any associated control measures in place:

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Permit Tracking #: AKS-052558

3. Did this inspection identify any sources of storm water or non-storm water discharges not previously identified in your SWPPP? ☐ 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? ☐ Yes ☐ No ☒ NA, no monitoring performed

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:

No pollutants going off-site and no outfall

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? ☐ Yes ☒ No

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? N/A

***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.*

For Agency Use
Permit Tracking #: AKS-052558

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: Snow Site

1. Brief Description: Site & Drainage area

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.)*

N/A

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.)*

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.)*

For Agency Use
Permit Tracking #: AKS-052558

Section 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.

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 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

9. Date corrective action initiated:

10. Date corrective action completed: Or expected to be 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 met the requirements of Part 6.3 of the permit, and that, based upon the results of this inspection, to the best of your knowledge, you are in compliance with the permit? ☒ Yes ☐ No

If NO, summarize why you are not in compliance with the permit:

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.

Name of Authorized Representative	Title	Email
Steven Church	Scupp Inspector	Steven.Church@alaska.gov

Signature

Date Signed: 7/6/23