


Name of Inspector: Frank Donroe	Signature: 
Date of Inspection: 4-17-20	Time Inspection Started: 1pm

1) UPON COMPLETION, RETURN THIS FORM AND REPORT ALL IDENTIFIED PROBLEMS IMMEDIATELY TO THE WEP COORDINATOR.

Key: Satisfactory - S, Not Applicable - NA, See Comment Section - C	AREAS SUBJECT TO INSPECTION		Additional Comments
	Southside of Bldg.	Northside of Bldg.	
Process Wastewater Management			No horses on site
Are there any hoses or signs of washing of vehicles or equipment (e.g. floats) outside?	S	S	
Interview one employee to assess compliance with this policy?			Name: Jason xxxxx
Is there a posting inside the building notifying workers of proper process waste water management?	S	S	
Are there posting outside the building notifying workers of proper process wastewater management	S	S	

Other Issues:

IMMEDIATELY CONTACT THE WEP COORDINATOR WITH ANY IDENTIFIED DEFICIENCIES AT (516) 204.5093. IF NOT AVAILABLE CONTACT SECURITY AT GATE 6 BACK STRETCH AT (718) 641.7400 OR AQUEDUCT MAIN SECURITY AT (718)659.3511