

Name of Inspector: Frank Donroe
 Signature: *[Handwritten Signature]*
 Date of Inspection: 5-19-23
 Time Inspection Started: 2pm

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

| Key: | | AREAS SUBJECT TO INSPECTION | | Additional Comments |
|--|--------------------|-----------------------------|---|---------------------|
| Satisfactory - S, Not Applicable - NA, See Comment Section - C | Southside of Bldg. | Northside of Bldg. | | |
| Process Wastewater Management | | | | |
| 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: Jeff xxxx |
| 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