



AUBURN

UNIVERSITY

**MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) ANNUAL
REPORT REPORTING PERIOD APRIL 1, 2024 – MARCH 31, 2025**

Prepared by
AUBURN UNIVERSITY

STORM WATER MANAGEMENT COMMITTEE

Submitted May 2025

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Introduction

This Annual Report was developed in accordance with the guidelines provided in Title 40 Code of Federal Regulations (CFR), Part 122.26(d) incorporated by reference in the Alabama Administrative Code 335-6 as administered by the Alabama Department of Environmental Management (ADEM) and NPDES ALR040030 Phase II General Permit effective October 1, 2021.

The purpose of this Annual Report is to describe the compliance efforts reflected in the University's Storm Water Management Program Plan (SWMPP) (**Appendix A**). The Annual Report will identify the control measure specific efforts undertaken by Auburn University from April 1, 2024, through March 31, 2025, to reduce the discharge of pollutants from Auburn University's main campus to the maximum extent practicable (MEP) to protect water quality and to satisfy the appropriate water quality requirements of the Clean Water Act (CWA).

This Annual Report and the University Storm Water Management Program is a result of a collaborative approach from individuals that represent both academic and operational areas of campus. The multi-disciplinary effort continues to be strengthened by its diversity and includes the following individuals and their areas of responsibility or interest:

Dr. Chris Anderson, Forestry, Wildlife & Environment

Mr. Nicholas Blair, Facilities Management – Planning, Design and Construction

Dr. David Blersch, Biosystems Engineering

Dr. Eve Brantley, Director Water Resource Center

Mr. Ben Burmester, Facilities Management – Planning, Design and Construction

Mr. Josh Conradson, Facilities Management – Planning, Design and Construction

Ms. Mona Dominguez, Water Resource Center - Alabama Water Watch

Mr. Michael Freeman, Risk Management & Safety

Ms. Valerie Friedmann, Architecture Planning & Landscape Architecture

Ms. Joan Hicken, Facilities Management – Waste Reduction & Recycling

Dr. Thorsten Knappenberger, Crop, Soil & Environmental Sciences

Mr. Mike Kensler, Office of Sustainability

Mr. Dan King, Facilities Management

Mr. Eric Klypas, Athletics Department – Field Management

Mr. Judd Langham, Facilities Management – Planning, Design and Construction

Ms. Charlene LeBleu, Architecture Planning & Landscape Architecture

Mr. Glenn Loughridge, Campus Dining

Mr. Tom McCauley, Risk Management & Safety

Dr. Chandana Mitra, Department of Geosciences

Dr. Jose Vasconcelos Neto, Civil Engineering

Mr. Buster Reese, Facilities Management, Planning, Design and Construction

Ms. Amy Strickland, Office of Sustainability

Mr. Justin Sutton, Facilities Management – Landscape Services

Mr. William Walker, Campus Dining

Dr. Amy Wright, Department of Horticulture

MS4 Description

Auburn University is a large teaching and research institution located in Auburn, Lee County, Alabama comprised of approximately 2081 acres of contiguous property, 402 buildings. Auburn University is one of the major land grant, liberal arts and science universities in the southeast. The area surrounding Auburn University consists of residential property to the east and southeast, agricultural property to the southwest and west and urban city property to the north and east.

Control Measures

Stormwater management controls or Best Management Practices (BMPs) will be implemented to the MEP to minimize pollution in storm water discharges from Auburn University's main campus. AU's Policy on Storm Water Management Compliance (**Appendix B**) serves as the regulatory mechanism as required by the Permit. The Permit and SWMPP require BMPs to be implemented addressing five minimum control measures. As required by Part III.B. of the Permit, the Annual Report will describe the University's efforts performed during this reporting period to implement the established BMPs (Public Education & Public Involvement on Storm Water Impacts, Illicit Discharge Detection & Elimination, Construction Site Storm Water Runoff Control, Post Construction Storm Water Management in New and Redevelopments and Pollution Prevention / Good Housekeeping for Municipal Operations) and will include:

1. The status of AU's compliance with Permit conditions, an assessment of the appropriateness of the identified BMPs, and progress towards achieving the statutory goal for each of the minimum control measures.
2. Results of information collected and analyzed during this reporting period, including any monitoring data used to assess the success of the SWMPP at reducing discharge of pollutants to the MEP.
3. A summary of storm water activities the University plans to undertake during the next reporting cycle.
4. Proposed changes and/or updates to the University's SWMPP.

5. All monitoring results collected during the reporting period in accordance with Part V. of the Permit.

BMP: Public Education & Public Involvement on Storm Water Impacts

Stormwater pollution prevention education leads to an informed and knowledgeable campus community that is more likely to support and comply with the BMP provisions. The targeted “Public” audiences of the University’s SWMPP are Auburn University faculty, staff, students, and visitors, which populate the campus on any given day. Within these populations, only students in residence housing live on campus. All other students, employees and visitors reside in the surrounding communities. The following activities were performed during the reporting period that were consistent with the intent of the SWMPP as follows:

Presentations and Events

Multiple presentations were offered by Auburn University throughout the course of this reporting period to promote water quality, water conservation and storm water management principles. Presentations were offered by a variety of different university professionals for diverse audiences.

Earth Day Extravaganza (April 22, 2024)

Auburn students celebrated our planet and promoting sustainable living at the Earth Day Extravaganza. The University Program Council, the Department of Geosciences, the Waste Reduction and Recycling Department, and the Office of Sustainability welcomed approximately **1500 attendees** with a day of education, fun, and food focusing on the preservation of earth’s resources including water resources through implementation of sustainable development goals.

On-Campus Stormwater BMP Tours

Throughout the year, various groups internal and external to campus express interest in understanding how Auburn University is managing stormwater. Stormwater tours are offered by multiple groups on campus including but not limited to the Water Resource Center, College of Science and Mathematics’ (COSAM) Arboretum, Facilities Management, Risk Management and Safety and the Office of Sustainability.

Who	When	Participants #'s
Earth Day Extravaganza Bike Tour	4-22-24	7
College of Education: English Foreign Lang	7-29-24	7
Sustainability 2000 Stormwater BMP Tour	9-24/25-24	40
COSAM - Geosciences	3-24-25	2

Fort Benning Earth Day Celebration (April 25, 2024)

Auburn University, in partnership with Fort Benning participated in the annual Earth Day Celebration at Fort Benning. In addition to the many Fort Benning participants, Auburn University Risk Management and Safety, College of Forestry Wildlife and Environment and College of Engineering offered lessons of water protection and conservation to **five hundred thirty-seven (537)** children from various local schools and community groups.

Low Impact Development StoryMap (2024)

In 2024, Auburn University Water Resource Center/Alabama Cooperative Extension System (AUWRC/ACES) led the development of an ArcGIS StoryMap, a tool that combines GIS data with information to create an interactive narrative. This project was a collaboration between AUWRC and Auburn University Facilities Management, aimed at increasing awareness about stormwater and Auburn University's efforts to manage it effectively. Multiple site visits were conducted by AUWRC staff to learn more about the Low Impact Development (LID) practices and capture updated photographs. After reviewing the LID handbook published by the Alabama Department of Environmental Management, Alabama Cooperative Extension System, and Auburn University, the information was integrated into the StoryMap. Titled “Making Stormwater Visible: Low Impact Development and Green Infrastructure Projects on Auburn University's Campus,” The project which will be made available to the public after internal review required a solid understanding of LID principles to translate complex practices into accessible information, aligning with Extension’s mission to provide community.



To view the StoryMap, scan the QR code or visit aub.ie/makingstormwatervisible

Lee County Water Festival (May 7-9, 2024)

Fifty-four (54) volunteers and approximately **one thousand one hundred (1100) fifth graders** from Lee County elementary schools participated in the annual Lee County Water Festival held at the Opelika Sportsplex. Representatives from the City of Auburn, Lee County, City of Opelika, Auburn University and City of Smith Station along with representatives from the Alabama Agricultural Extension System, the Department of Agriculture's Natural Resources Conservation Service and Clean Water Partnership partnered together to educate children on the importance of water, conservation of natural resources and becoming better stewards of the environment.

Municipal Wet Weather Stormwater (MS4) Conference (May 15-17, 2024)

Hosted by Auburn University, EPA Region 4 and the International Erosion Control Association, the annual Municipal Wet Weather Conference (MS4) is recognized as a key stormwater conference. The conference was attended by **one hundred and sixty (160) individuals** from around the region. Industry-leading speakers covered a range of topics, including watersheds, erosion prevention, sediment control, green infrastructure, regulations, resiliency, stormwater standards, and post-construction BMP implementation, inspection, and maintenance. Representatives from state regulatory agencies participated in an acclaimed State Panel discussion. This year, the Auburn University Stormwater Research Facility offered [Installer Training](#) & [Field Day](#), providing attendees with a comprehensive learning experience.

Camp War Eagle (May-July 2024)



Every summer prior to the fall semester, Auburn University hosts Camp War Eagle (CWE) for incoming freshmen. Through CWE, students are provided with an experience that promotes the academic, social, and personal opportunities incoming freshmen students can experience. A website provides all necessary information and instructions to prepare incoming freshman for an orientation session and the first year at Auburn University. The Office of Sustainability provides information on sustainability at Auburn and provides each attendee a [Sustainable Student Action Guide](#), which includes a section on "Saving Water" listing water conservation and water quality practices a sustainable development goals. During this reporting period, Camp War Eagle hosted a total of **thirteen thousand five hundred forty-three (13543) students and their guests**.

Watershed Clean-Up Efforts

Campus Location	Date	Target	Participation	Participants
PMC on Campus	4/5/24	Litter & Debris	16	AU Staff & Students
Campus	4/18/24	Litter & Debris	26	AU Staff & Students
Help the Hooch	10/4/24	Litter and Debris	99	Fort Moore Soldiers, Staff & AU Staff
PMC on Campus	11/8/24	Litter and Debris	70	AU Students & ALOAS Staff
PMC on Campus	12/12/24	Litter and Debris	23	AU Faculty, Staff & Students
PMC at Veterans Parkway, Auburn	2/28/25	Litter & Debris	10	ALOAS Staff
PMC on Campus	3/1/25	Litter & Debris	76	AU Staff & Students



Sustainable Development Goals



The University's Office of Sustainability promote Sustainable Development Goals (SDGs) with various focuses.

The [Sustainable Development Goals \(SDGs\)](#) emerged from rigorous research into global conditions and trends and provide a

"blueprint to achieve a better and more sustainable future for all.

They address the global challenges we face, including those related to poverty, inequality, climate change, environmental degradation, peace and justice. The 17 Goals are all

interconnected, and in order to leave no one behind, it is

important that we achieve them all by 2030." ~United Nations Website

Initiated in 2012 at the United Nations (UN) Conference on Sustainable Development in Rio de Janeiro, they follow up the eight [Millennium Development Goals \(MDGs\)](#) established in September 2000 and were adopted by the UN in 2015.

Sustainability Picnic (August 28, 2024)

The goal of this event is to get new and current students involved with sustainability on campus. Numerous student organizations, academic and university departments, and community resources are involved including Alabama Water Watch, the Marine Biology club, the Arboretum, College of Forestry Wildlife and Environment and others promote natural resource conservation and management. This annual event is held at the College of Science and Mathematics Davis Arboretum hosted **four hundred-sixteen (416)**

individuals. In addition to promoting sustainability initiatives campus wide, the event offers attendees the opportunity to take a self-guided tour of the Arboretum's many stormwater management features. During this reporting period, the Arboretum welcomed over **two thousand (2000) visitors** that had access to this same self-guided stormwater BMP tour.



Sustainability 2000: Introductory to Sustainability (Fall Semester)

The study of sustainability examines the interconnectedness of three dimensions: the environment, society, and the economy. Using these dimensions as a lens, students explore various systems that connect society (e.g., our food, climate change, how we build our cities, our energy choices, how we dispose of our waste, environmental justice, human population growth and consumption, among others). Through instructor and guest lectures, dynamic discussion sections, and reflection assignments, the class will discuss case studies, see sustainability in action here at Auburn University through campus tours, reflect on practices and barriers, and assess how the community can work together at different levels to make more sustainable choices.

In September 2024, multiple tours of campus highlighting green infrastructure were offered to the students in this curriculum. The tours focused on post construction stormwater management practices on campus to include successful implementation of bioswales, rain gardens, permeable pavement, and green roof. These interactive tours allowed **forty (40) students** to better understand why post construction stormwater management practices are important to preserve water resources, enhancing the campus landscape and protecting the campus infrastructure.

Gameday Recycling (Sept-Dec 2024)

Gameday recycling is an opportunity for the university to demonstrate to the campus community that recycling and waste reduction activities are not limited to the home. Sporting events generate a large amount of waste, much of which can be recycled. Our goal is to become the number one recycler in the SEC! Before each home football game, Waste Reduction and Recycling Department staff place 575 recycling bins inside Jordan-Hare Stadium and around campus for fans to recycle their plastic bottles and aluminum cans. Student volunteers pass out recycling bags in tailgate areas for fans to recycle their plastic bottles and aluminum cans.



Alabama Water Resource Conference (September 4-6, 2024)



Hosted by Auburn University's Water Resource Center, the annual Alabama Water Resources Conference is a forum for all participants of our water resources community, providing opportunities for conversation about the many multidisciplinary aspects of water resources, and making connections that will improve how we understand the complex water issues that are of importance to this state, the region, and the nation. This year's event reached maximum capacity of **three hundred seventy (370) attendees**.

Fort Moore Help the Hooch (October 4, 2024)

Auburn University has entered into an Intergovernmental Support Agreement (IGSA) with Fort Moore located near Columbus Ga and adjacent to the Alabama-Georgia border to provide support to the base's environmental compliance responsibilities. Auburn University was pleased to support Fort Moore's annual Help the Hooch river clean up event to remove litter and debris from the Chattahoochee River. Nearly **ninety-nine (99) volunteers** participated in the event to remove **1.05 tons of trash** from the Chattahoochee River.



Alabama Stormwater Association (ASA) Virtual Seminar (November 30, 2024)

ASA hosted Dr. Ryan Winston of Ohio State University to offer a virtual presentation entitled "Maintaining Green Infrastructure". Dr. Winston's presentation addresses the need for proper maintenance as critical for the efficient and effective function of all infrastructure, including green infrastructure. The topic of maintenance is becoming more prevalent as



Alabama developers and communities move toward adopting natural materials and natural processes to deliver infrastructure services. Furthermore, despite the environmental and economic benefits of green infrastructure, operations and maintenance has been repeatedly raised as a technical barrier to the adoption of green infrastructure.

Auburn University continues to have representation on the ASA Board and helped to facilitate the webinar. The virtual webinar was attended by **thirty-five (35) stormwater professionals**.

ALOAS Lunch and Learn (December 11, 2024)

The Auburn, Lee County, Opelika, Auburn University and Smith Station (ALOAS) MS4 group continues to meet quarterly to promote events, exchange ideas and seek opportunities for collaboration. On December 11, 2024, ALOAS offered the community a lunch and learn session focusing on logging guidelines and proper erosion and sediment control BMP implementation during logging practices. The presentation was provided by Mr. Carey Potter of the Alabama Forestry Commission. The session was open to the public but targeted local contractors. The session was attended by **twenty-nine (29)** individuals.

Native Plant Planting (February 21, 2025)

The Office of Sustainability and the College of Architecture, Design and Construction provided an opportunity for landscape design students to plan, plant, and maintain the rain garden space outside Dudley Hall. Plants will be a combination of native grasses and forbs. In the introduction we talked about the rain garden function of slowing down water, and the advantages of native plants – one thing being less irrigation needed. **Twenty-five (25) students** participated in this learning opportunity.



Sustainability: Outdoor Movie (March 6, 2025)

Auburn University Office of Sustainability partnered with the Alabama Rivers Alliance (ARA) to bring their 2024 ***Southern Exposure*** films to Auburn's campus. These films, created as part of an annual 6-week summer fellowship program offered by ARA, showcase Alabama's biodiversity and the people who work to protect it, as well as the state of environmental public health in Alabama. A variety of topics were covered by these films such as the pollution threat of PFAS in Alabama's drinking water, the importance of native plants, and the role of estuarine seagrass in Alabama's coastal ecology.



Prior to the film in the courtyard, informational tables staffed by representatives from ARA and the Auburn Water Resources Center/ Alabama Water Watch. These organizations shared the work that they do to protect Alabama's waterways throughout the state. There was also a build-your-own s'mores station staffed by Auburn Outdoors, an organization based out of the Auburn University Recreation and Wellness Center, as well as popcorn and hot drinks provided by the Office of Sustainability.

Additionally, there was an insightful and active Q&A session with ARA executive director Cindy Lowry following the film. **Sixty (60) faculty, staff and students** attended this outdoor movie.

AU Climate Symposium: Creating a Healthier Environment for Everyone (March 25, 2025)

The Office of Sustainability and the College of Agriculture offered the 4th annual AU Climate Symposium for faculty, graduate students and stakeholders doing climate related research. The goal of the event was to share



CLIMATE SYMPOSIUM 2025: CREATING A HEALTHY ENVIRONMENT FOR EVERYONE

TUES. MARCH 25TH
9AM-1:30PM

AUBURN UNIVERSITY

Event designed to develop collaborations towards regional climate resilience.

Features:

- lightning presentations, stakeholder panel, and table discussions
- student research poster presentations
- keynote by Lee Hedgepeth, AL climate journalist
- and lots of Networking opportunities

Free registration required by March 10th



Register Free Now
by 3/10



aub.ie/2025climatesymposium

and communicate climate research to promote future collaboration. The Symposium brought together experts, researchers, and students to discuss environmental sustainability and climate resilience. The event featured lightning talks, stakeholder panels, research poster sessions, and a keynote address from climate journalist Lee Hedgepeth. **One hundred sixty (160)** attendees engaged in insightful discussions on innovative solutions for a healthier environment.

Beyond the Farm (March 26, 2025)

The College of Agriculture offered a learning and networking opportunity to engage in the many AG opportunities and clubs available at AU. The goal of *Beyond the Farm* is to elevate awareness of agriculture's vital role across Auburn's campus. The College of Agriculture offers multiple disciplines that address natural resource conservation to include water protection. More than 25 clubs and departments joined forces to showcase how agriculture directly influences our students' health and daily lives." The event was attended by 500 individuals.



Peers Network Battery Recycling Program (continual)

Sponsored by the Office of Sustainability, the Ambassadors are introduced to all the sustainability-related practices and policies at Auburn University, including the Storm Water Management Plan and practices on campus. The Battery Recycling initiative has located over 60 bin locations around campus to allow the campus community an easy way to recycle their used batteries rather than throwing them in the solid waste trash receptacle. During this reporting period, these on-going efforts contributed to the **eighteen thousand three hundred fourteen (18314) Lbs.** batteries recycled by Auburn University.





The Alabama Cooperative Extension System (ACES) is the primary outreach and engagement organization for the land-grant mission of Alabama A&M University and Auburn University in cooperation with Tuskegee University. ACES provides research-based educational programs in agriculture; forestry, wildlife, and natural resources; family and consumer sciences; economic and community development; 4-H and youth development; and urban affairs.

The ACES Water Program is the Extension hand of the [Auburn Water Resource Center](#). Led by Acting Director, Mona Dominquez, the goal of the AWRC is to make a positive impact on water quality issues throughout Alabama. This is accomplished through on-the-ground Extension and outreach, watershed resource planning, education, and behavior change initiatives. By empowering communities, farmers, cities, and schools to become better stewards of their water resources, the water program facilitates multi-year grant-funded projects that use a community-led, watershed-based approach to remediating impaired urban waters and planning for a more sustainable future.

A keystone program of the AUWRC Alabama Water Watch (AWW). The program receives support from the Alabama Agriculture Experiment Station, Alabama Cooperative Extension System as well as external funding to provide these services to the public. AWW mission is to improve water quality and water policy through citizen monitoring and action. With a “data-to-action” focus, AWW engages citizens in collecting, analyzing, and understanding their water monitoring data to make positive impacts.

See the amazing impact AWRC and AWW made in 2024

[2024 AUWRC Annual Report](#)

[2024 AWW Annual Report](#)

Measure Specific Evaluation

Auburn University continued to be successful in providing a variety of information to the campus and local community related to stormwater management, water quality and water conservation. AU strives to engage faculty, staff, and students through education to serve the community and to become more involved in making a positive impact. During this reporting period, AU continued to foster an open and collaborative relationship with the many different groups on and off campus, from the engagement activities offered by ASA, through the continued pursuit of research initiatives and funding to improve and protect water resources as witnessed by the Auburn Water Resource Center and Alabama Cooperative Extension System, the innovative research being done by the many academic disciplines on campus and for the continued efforts by the Office of Sustainability and the Student Government Association to engage the campus community.

Measure specific activities planned for the next reporting period

During this next reporting period, Auburn University plans to continue to promote the goals of the storm water program to include at a minimum:

1. Continue to sponsor and collaborate with shareholders for multiple watershed clean up events.
2. Participate with ALOAS partners to offer the annual Lee County Water Festival (May 6-7, 2025).
3. Continue to have active ASA Board membership to assist in the development and delivery of multiple learning opportunities.
4. Continue to foster the partnership with ALOAS by meeting quarterly to communicate local storm water challenges, opportunities, and community concerns.
5. Continue to promote local, national, and global sustainability initiatives to include storm water management best management practices.

BMP: Illicit Discharge Detection & Elimination

During this reporting period, Auburn University continued to utilize the storm water infrastructure engineering assessment to prioritize areas on campus requiring further assessment and/or repair along with field observations by AU Facilities Management – Utilities and Energy, Mechanical Shops, Water Resources and Risk Management & Safety to investigate sources of potential illicit discharges. An updated map identifying the stormwater conveyance system maintained by Auburn University is linked below.



[AU-MS4-Map-24-25](#)

Through continued educative efforts, an informed campus community is relied upon to relay observations of potential illicit discharges. These observations are communicated to AU Administration through multiple methods to include Facility Management's 24-hour Work Management System (844-HELP), the AU "Ask Facilities" web tool or communicating directly to Risk Management & Safety. Dry weather screening is performed on an annual basis on the outfalls identified on campus. Screening includes visual observations of flow, and outfall condition and may include water quality monitoring to further assess suspected conditions. Upon discovery or suspicion of a potential illicit discharge, further investigation is initiated. A variety of measures can be deployed to track the source of the illicit discharge and may involve multiple AU groups as well as the City of Auburn, as necessary. The completed Outfall Reconnaissance Inventory Field Sheets documenting the outfalls evaluated this reporting period are included in **(Appendix C)**. All investigated suspect illicit discharges, and their details are included in **(Appendix D)**.



Measure Specific Evaluation

Auburn University continued IDDE efforts and address sources of pollutants from being introduced into the University's MS4. Accomplishments and ongoing actions supporting this BMP included:

- Maintenance of the University's Policy on Storm Water Compliance continues to serve as the regulatory mechanism for this measure.
- Online stormwater training was provided to operational personnel that included illicit discharge detection and elimination elements. During this reporting period, training was provided for **one hundred sixteen (116)** individuals.
- A High-Definition Stream Survey (HDSS) was performed on five (5) miles of Parkerson Mill Creek and its unnamed tributaries. The goal of the effort was to be able to provide systematic categorization of conditions facilitating management, conservation, and restoration planning. The final report was published in November 2024 and identifies problem areas, support repeatable documentation to assess on-going or future remediation measures and will serve as a powerful education tool for both resource managers and research initiatives.
- Transient elevated e-coli concentrations and construction related runoff continued to be detected during this during this reporting period. AU Facilities Management maintains a current map of all infrastructure and is instrumental in recognizing and aiding in the investigation of these conditions.

Measure specific activities planned for the next reporting period

Auburn University will continue the Illicit Discharge Detection and Elimination measures as defined in the University's SWMPP. During the next reporting period, the following activities are planned:

1. Provide annual IDDE training to increase the community's level of awareness of pollution prevention.
2. Evaluate the HDSS data collected this reporting period and determine opportunities for improvement and/or future initiatives.
3. Explore opportunities to improve stream corridor and infrastructure condition as needed through continual investigation.
4. Continue partnership with Alabama Water Watch to regular monitor from the watershed to identify potential illicit discharge conditions.



BMP: Construction Site Storm Water Runoff Control

In accordance with Part III (B) (4) of NPDES Permit No ALR040030, Auburn University developed the Construction Site Storm Water Runoff Control Best Management Practice. Auburn University's Facilities Management is responsible for all construction projects on campus and implementation of this measure.

During this reporting period, a total of five (5) qualifying construction sites were managed on campus that required storm water protection measures to be implemented and maintained. Details specific to these five (5) sites and three (3) other AU projects located off campus to include the number of inspections, number of complaint notices and number of runoff complaints can be viewed in (**Appendix E**) of this report.

Measure Specific Evaluation

Based on the requirements identified in Part III (B) (4) of NPDES Permit No ALR040030, Auburn University implemented Design Standards assist in meeting these requirements. The Design Standards establish a measurable performance standard to qualify the effectiveness of on-site controls.

- Continued to maintain and perform periodic review of Construction Front End documents including Notice of Land Disturbance and Notice of Intent to Close Permit.
- Continued scheduled consultation with Facilities Management Construction Management and routine inspection of all sites to evaluate the implementation of each site's specific Construction Best Management Practices Plan (CBMPP) and aid in addressing any observed declining performance.
- Annual training events offered to include in-house and ALOAS sponsored for contractors and employees to promote responsibilities and for positive informational exchange.

Measure specific activities planned for the next reporting period

Auburn University will continue implementing Construction Site Storm Water Runoff Control as defined in the University's SWMPP. During the next reporting period, the following activities are planned:

1. Provide annual training to AU Project Managers and Design Engineers.
2. Perform and document inspections as required to evaluate the effectiveness of the Contractors implementation of the design CBMPP and initiate escalation as necessary.
3. Through the ALOAS partnership, offer ESC Workshop (Lunch and Learn).

BMP: Post Construction Storm Water Runoff Control

As a component of the Auburn University Design and Construction Standards, the Post-Construction Stormwater Manual provides the principles, guidelines, and standards for stormwater management design for new campus projects. By providing a set of comprehensive best management practices for stormwater management, future campus construction projects will protect and improve water quality, provide campus flood protection, and reduce stormwater flow rates to downstream waters. The Post- Construction Stormwater Manual includes a stormwater management review checklist to review compliance with the University's design standards. Multiple projects were completed, are in construction, or are currently being designed during this reporting year.

A list of projects reviewed in this reporting year are found below:

Project No.	Project Name	Stormwater Best Management Practices (BMPs)					
		Detention or Retention	Subsurface Detention	Bioretention	Pervious Paving	Green Roof	Stream Restoration
22-213	Gogue Performing Arts Center Studio Theatre and Amphitheatre Build-Out	Yes	No	No	No	No	No
23-466	Auburn University Event Center- Addition	No	Yes	No	No	No	No

One project was completed that added permanent post-construction stormwater best management practices to the campus inventory. A highlight of those can be found in the images below and bolded in the overall summary of the campus-wide BMPs located in the table.

A highlight of those can be found in the images below and bolded in the overall summary of the campus wide BMPs located in **(Appendix F)**.



Rain Garden (College of Education- AU Project # 18-538)

Green Infrastructure Research Highlight

The Green Infrastructure Lab at Auburn is an interdisciplinary lab that seeks natural solutions to environmental challenges presented by built environments. The main purpose of the lab is to develop design models for standard stormwater control measures that can be used to meet specific effluent temperature standards and to maintain the required thermal regime in a receiving stream. This project engages controlled laboratory tests to assess low impact development (LID) stormwater control measures to reduce the impact of the thermal characteristics of stormwater runoff. The laboratory provides environmental control and is designed for both wet and dry research. All faculty researchers are members of the AU Green



Infrastructure Lab Team. Current research led by Dr. David Blersch, associate professor of ecological engineering within the College of Agriculture's Department of Biosystems Engineering, focuses on the use of filamentous algae to remove pollutants such as nitrogen and phosphorus from wastewater

and then reusing the source of farmed algae as feedstock for other reuse products such as soil fertilizer or a source of bioplastics. In addition, Dr. Blersch' research also seeks to address wastewater challenges faced by the poultry industry. This Green Lab research explores natural systems such as wetlands ecosystems to remove pollutants commonly generated by this growing industry. A link to the most recent article highlighting this exciting research below.

[Green Infrastructure Lab seeks solutions to reuse wastewater](#)

Measure Specific Evaluation

During this reporting period, Auburn University continued efforts to strengthen this measure through education and increasing expectations. Utilizing an extensive plan review process, AU staff have been successful in evaluating many best management practices during this reporting period.

Measure specific activities planned for the next reporting period

Auburn University will continue implementation of Post Construction Storm Water Management in new development and redevelopment as defined in the University's SWMP. During the next reporting period, the following activities are planned:

1. Continue to advise University Design Leads on the Design Standards required for future University projects.
2. Continue collaboration with the Stormwater Committee to improve the promotion of post construction green infrastructure BMPs.
3. Continue to highlight research advancements as available.
4. Continue to perform and document annual post construction BMP inspections utilizing the AiM Work Management application used by Facilities Management.
5. Continue to maintain an updated inventory of storm water BMPs.

BMP: Pollution Prevention / Good Housekeeping

Street, Pedestrian Surfaces, Parking Lot, Parking Deck Cleaning Program

Facility Management's Landscape Services utilizes street sweepers daily to address the removal of accumulated debris **two hundred sixty-four (264 yd³)** from parking lots, parking decks, streets, pedestrian walkways, and sidewalks. Landscape Services provides daily inspections of streets, street drains and curbs. During fall and winter months, Landscape Services remove leaves and other debris daily throughout campus. Landscape Services also incorporates the use of a large vacuum that allows the landscape debris, which is harvested on campus grounds, to be removed before it is introduced into a storm drain system. Mowers with mulching equipment pulverize leaves, limbs and debris on site which reduces possible storm drain blockage. This process is reduced during the spring and summer months unless storms or high winds cause leaves, limbs, and debris to cover our campus grounds and streets; at that point we use the same procedures as the fall and winter removal. This system not only reduces the problem of storm drain blockage but allows AU to compost the harvested material and eventually incorporate it back into campus landscape.

Storm Water Conveyance System Cleaning Program

Auburn University Landscape Services inspects all storm water conveyance outfalls routinely throughout the year. This is done after heavy rain or storm activity. If any large limbs, trees, or debris are blocking the area, the blockage is removed as quickly as possible. Streamside maintenance to include invasive plant removal continues and allows better accessibility to Parkerson Mill Creek. On-going efforts to remove invasive vegetative species and replace them with native species have further enhanced Parkerson Mill Creek. Throughout this reporting period, Landscape Services calculated the removal of approximately **nine hundred fifty-six (956 yd³)** of leaves were harvested and **two hundred eighty-three (283 yd³)** of limb debris were removed.

Integrated Pest Management

All areas maintained on campus have a four-tiered management system, however all areas are not equal in tolerance and /or action thresholds. These thresholds are based on pedestrian traffic, tolerance thresholds set down by building occupants and historic importance of an area.

Understanding that over application of chemicals to control pests on campus landscapes can have a detrimental effect to the environment, Facility Management's Landscape Services objective is to survey/monitor selected areas on campus and determine if the threshold of a pest warrants chemical applications. Incorporation of best management practices such as aeration, fertilization and proper irrigation promote healthy trees, shrubs and turf while reducing the unnecessary level of chemicals applied to the environment.

An estimated 235 acres of AU main campus's premium areas (turf, trees, shrubs, and hardscapes) receives targeted IPM application. Leaves on turf and turf clippings are mulched and/or recycled to reuse on campus. An estimated **four thousand two hundred (4200 yd³)** of grass clippings are beneficially reused on campus each year.

Waste Reduction & Recycling

The Waste Reduction and Recycling Department (WRRD) manages all waste contracts on campus and works with faculty, staff, and students daily to provide easy and convenient recycling to Auburn University.



WRRD manages the Campus Building Recycling program, Game Day Recycling, Recycle Mania, office clean-outs, toner and ink cartridge recycling, indoor/outdoor event trash and recycling bins, and secure document shredding services. WRRD promotes initiatives to divert waste from being landfilled. The university diverted 27% of waste collected from disposal at a landfill (FY24). The waste diverted included paper, cardboard, plastic containers, aluminum cans, steel cans, metals, toner cartridges, and construction and demolition debris.

WRRD initiatives are also promoted through education and outreach on campus and in the surrounding community. Outreach initiatives encompass events, including Earth Day Extravaganza, GameDay Recycling, Litter Art, Collegiate Recycling Challenges, Plastics Free July, and community partnerships, such as the East Alabama Recycling Partnership.

In partnership with Coca-Cola and Atlas RVM Systems, four (4) reverse vending machines (RVM) on campus were installed which collected 11,461 bottles and cans for recycling during this compliance period.



Spill Prevention Control & Countermeasure (SPCC) Program

Auburn University maintains compliance efforts consistent with 40 CFR 112 and the University's SPCC Plan. The SPCC Plan addresses the University's program to manage oil and other petroleum products defined by 40 CFR 112.7(2) and 40 CFR 112.7(4). This includes the management of fuel oils, gasoline, lubricating oils, hydraulic and dielectric fluids as they are utilized and stored on Auburn University's main campus. The University inspects all applicable containers (fuel tanks, generators, elevators, and drums) monthly and all transformers annually. These routine inspections evaluate the condition of the containers to ensure proper functionality and management to prevent releases to the environment.

Applicable SPCC containers	Number of Inspections	Volume of SPCC applicable oil (gallons)
Tanks, Generators, Drums	720	145120
Elevators	1332	17380
Pad Mount Transformers	244	58707
Satellite Equipment	17	3769

Used Oil Recycling Program

Auburn University's Department of Risk Management & Safety and Facilities Management routinely collects and recycles used oil from campus operations. Throughout this reporting period, AU retained the services of Universal Environmental Services, LLC based out of Peachtree City Georgia for removal and recycling of campus generated used oil. Throughout this reporting period, Universal Environmental Services collected 2094 gallons of used oil from campus operations for recycling.

Used Cooking Oil Recycling Program

Auburn University's Dining Services collects and recycles all used cooking oil generated from the University's dining facilities. During this reporting period, used cooking oil was collected from AU dining/athletic facilities under contract with Green Earth Options Bio-Fuel. The Rane Culinary Science Center / Auburn University Hotel & Conference Center also collects used cooking oil and manages it through Beau Project, LLC. For recycling. During this reporting period Beau Project received 4027 gallons of used cooking oil.

Regulated Waste Management

Risk Management & Safety promotes proper regulated waste management throughout all campus operations. Regulated waste includes RCRA hazardous waste, universal waste lamps, batteries, pesticides, mercury-containing equipment, electronic waste, medical waste and pathological waste generated on campus. Through reoccurring training events, consultations and other marketing strategies, proper management of these items is promoted. Disposal of these items via solid waste or sanitary sewer is prohibited. Proper container management by the generator is critical to ensure compliance with regulatory requirements and to prevent releases of harmful chemicals to the environment. During this reporting period, AU properly managed 12375 individual containers of hazardous waste, 22548 Lbs. of medical waste and 276804 Lbs. of pathological waste.

Municipal Facility Inspection Program:

During this reporting period, AU followed the Standard Operating Procedures (SOP) for performing municipal facility inspections at various facilities located on main campus. Each facility is responsible for maintaining their respective areas and improving conditions as identified. Annual inspections at these facilities include the assessment of facility activities including equipment washing, street sweeping, road maintenance, waste management, vegetation control, fleet maintenance, external building maintenance and material storage. The SOP, Inventory of Municipal Facilities and the Inspection Records for this reporting period can be found in (**Appendix G**)

Measure Specific Evaluation

Throughout this reporting period, the on-going preventative measures taken by multiple groups on campus have removed items that could have been ultimately destined to our local landfill, groundwater and or surface waters. The University promotes waste minimization efforts to include regulated hazardous and non-hazardous waste, solid waste, e-waste and construction and demolition waste through reuse and recycling where possible. The University has developed sound practices to manage equipment and operations to minimize releases to the

environment and provides training to University employees on these best management practices.

Measure specific activities planned for the next reporting period.

Auburn University will continue to perform and promote sound pollution prevention good housekeeping management practices.

1. Continue to provide pollution prevention environmental awareness training to campus.
2. Continue to promote proper waste management practices and waste minimization activities through education and action.
3. Maintain an updated municipal facility inventory.
4. Perform annual municipal facility inspection and address non-conformance activities if discovered.

Monitoring Plan for Pathogen Impairment

The Parkerson Mill Creek Watershed is in Lee County; the watershed is part of the Chewacla Watershed, in the lower Tallapoosa River Basin. The 9.3 square mile (5,981 acres) watershed contains 21,000 meters (68,500 ft.) of main stem perennial stream and approximately 86,000 meters (282,152 ft.) of tributary stream length. The stream network empties into Chewacla Creek, just south of the H.C. Morgan Water Pollution Control Facility

The watershed includes the City of Auburn, Auburn University, and the surrounding areas. The headwaters of Parkerson Mill Creek are approximately 3,000 meters (9,845.5 ft.) in length and are located on the campus of Auburn University.

In 2007, ADEM listed Parkerson Mill Creek as impaired on Alabama's 303(d) List of Impaired Waters for pathogens from point source and non-point sources, primarily urban runoff, and storm sewer connections. As such, Auburn University monitors Parkerson Mill Creek by performing bacteriological analysis through the AU Water Resource Center's Alabama Water Watch (AWW) program. The results of the regular monitoring effort for this reporting period are contained in (**Appendix H**) of this Annual Report.

Appendix A

Stormwater Management Program Plan

April 1, 2024, through March 31, 2025



AUBURN

UNIVERSITY

STORM WATER MANAGEMENT PROGRAM PLAN

Prepared by
AUBURN UNIVERSITY
RISK MANAGEMENT & SAFETY

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INTRODUCTION

This Storm Water Management Program Plan (SWMPP) was developed in general accordance with the guidelines provided in Title 40 Code of Federal Regulations (CFR), Part 122.26(d) incorporated by reference in the Alabama Administrative Code 335-6 as administered by the Alabama Department of Environmental Management (ADEM) and NPDES ALR040030 Phase II General Permit effective October 1, 2021.

The purpose of this SWMPP is to describe Auburn University and its operation and identify the Best Management Practices (BMPs) to be utilized to reduce the discharge of pollutants from Auburn University's main campus to the maximum extent practicable (MEP) to protect water quality and to satisfy the appropriate water quality requirements of the Clean Water Act (CWA).

The Storm Water Committee formed to develop this SWMPP is comprised of individuals from both academic and operational areas of campus. The collaborative effort was strengthened by its diversity and includes the following individuals and their areas of responsibility or interest:

Dr. Chris Anderson, Forestry & Wildlife Sciences

Mr. Nicholas Blair, Facilities Management – Planning, Design and Construction

Dr. David Blersch, Biosystems Engineering

Dr. Eve Brantley, AU CSES, ACES

Mr. Ben Burmester, Facilities Management – Planning, Design and Construction

Ms. Mona Dominguez, Water Resource Center - Alabama Water Watch

Mr. Mike Freeman, Risk Management and Safety

Ms. Valerie Friedmann, Architecture Planning & Landscape Architecture

Ms. Joan Hicken, Facilities Management – Waste Reduction & Recycling

Dr. Thorsten Knappenberger, AU CSES

Mr. Mike Kensler, Office of Sustainability

Mr. Dan King, Facilities Management

Mr. Eric Kleypas, Athletics Department – Field Management

Mr. Judd Langham, Facilities Management – Planning, Design and Construction

Ms. Charlene LeBleu, Architecture Planning & Landscape Architecture

Mr. Glenn Loughridge, Campus Dining

Mr. Tom McCauley, Risk Management & Safety

Dr. Chandana Mitra, Department of Geosciences

Ms. Wendy Peacock, Facilities Management – Planning, Design and Construction

Mr. Buster Reese, Facilities Management - Planning, Design and Construction

Ms. Amy Strickland, Office of Sustainability

Mr. Justin Sutton, Facilities Management – Landscape Services

Mr. William Walker, Campus Dining

Dr. Amy Wright, Department of Horticulture

Objective

The primary goal of the developed SWMPP is to improve the quality of surface waters at Auburn University by reducing the amount pollutants contained in storm water runoff to a maximum extent practicable (MEP). Auburn University will seek to reduce the pollutants from entering storm water runoff through the implementation of best management practices. The SWMPP will describe the minimum best management practices to be implemented by Auburn University and as required by ADEM General Permit ALR040030 (effective date October 1, 2021).

1.1 MS4 Description

Auburn University is a large land grant educational institution located in Auburn, Lee County, Alabama comprised of approximately 2081 acres of contiguous property. Auburn University is one of the major liberal arts and science universities in the southeast. The area surrounding Auburn University consists of residential property to the east and southeast, agricultural property to the southwest and west and urban city property to the north and east.

1.2 Definitions

ADEM: Alabama Department of Environmental Management responsible for enforcing environmental regulations in the State of Alabama.

Best Management Practices (BMP): may include schedule of activities, prohibition of practices, maintenance procedures or other management practices to prevent or reduce

the pollution of Waters of the State. BMPs also include treatment requirements, operating procedures and practices both structural and non-structural designed to control runoff, spillage or leaks, sludge or waste disposal or drainage from raw material storage.

Clean Water Act (CWA): The Clean Water Act is an Act passed by U.S. Congress to control water pollution. It is formally referred to as the Federal Water Pollution Control Act of 1972 or Federal Water Pollution Control Act Amendments of 1972.

Code of Federal Regulations (CFR): A codification of the final rules published daily in the Federal Register. Title 40 of the CFR contains the environmental regulations.

Composite Sample: A sample collected with consideration giving towards flow and time.

Control Measure: any Best Management Practice or other method used to prevent or reduce the discharge of pollutants to Waters of the State.

Discharge: when used without a qualifier, refers to “discharge of pollutant” as defined as ADEM Admin Code 335-6-6-.02(m)

EPA: Environmental Protection Agency

Grab Sample: A sample that is taken on a one-time basis without consideration of the flow rate of the sampling media and without consideration of time.

Green Infrastructure: refers to systems and practices that use or mimic natural processes to infiltrate, evapotranspiration (the return of water to the atmosphere either through evaporation or by plants), or reuse storm water or runoff on the site where it is generated.

Illicit Connection: any man-made conveyance connecting an illicit discharge directly to municipal separate storm sewer (MS4)

Illicit Discharge: defined at 40 CFR 122.26(b)(2) and refers to any discharge to a municipal separate storm sewer (MS4) that is not entirely composed of storm water,

except those discharges authorized or excluded under an NPDES permit.

Low Impact Development (LID): an approach to land development (or redevelopment) that works with nature to manage storm water as close to its source as possible. LID employs principles such as preserving and recreating natural landscape features, minimizing effective imperviousness to create functional and appealing site drainage that treat storm water as a resource rather than a waste product.

Maximum Extent Practicable (MEP): the technology based discharge standard for municipal separate storm sewer systems to reduce pollutants in storm water discharges that was established by the Clean Water Act (CWA) Section 402(p). A discussion of MEP as it applies to small MS4s like Auburn University is found at 40 CFR 122.34

Municipal Separate Storm Sewer System (MS4): A conveyance or system of conveyances (including roads with drainage systems, municipal streets, catch basins, curbs, gutters, ditches, manmade channels, or storm ditches) owned or operated by a state, city, town or other public body having jurisdiction over the collection and conveyance of storm water which is not a combined sewer and which is not part of a publicly owned treatment works.

Notice of Intent (NOI): the mechanism used to “register” for coverage under a General Permit.

National Pollutant Discharge Elimination System (NPDES): The national program for issuing, modifying, revoking and reissuing, terminating, monitoring and enforcing permits and imposing and enforcing pretreatment requirements under Section 307, 318, 402 and 405 of the CWA.

Permit: NPDES ALR040030 issued to Auburn University & became effective October 1, 2021.

Permittee: Auburn University

Priority Construction Site: any qualifying construction site in an area where the MS4

discharges to a waterbody which is listed on the most recently approved 303d list of impaired waters for turbidity, siltation or sedimentation, any waterbody for which a TMDL has been finalized or approved by EPA for turbidity, siltation or sedimentation, any waterbody assigned the Outstanding Alabama Water use classification in accordance with ADEM Admin Code 335-6-10-.09 and any waterbody assigned a special designation in accordance with 335-6-10-.10

Storm water: defined at 40 CFR 122.26(b)(13) storm water runoff, surface runoff and drainage.

Storm Water Management Program Plan (SWMPP): A plan developed for implementation of NPDES permit requirements.

Waters of the State: All waters that are currently used, were used in the past, or may be susceptible to use in interstate or foreign commerce. Waters of the State include but are not limited to all interstate waters and interstate lakes, rivers, streams (including intermittent streams), mudflats, sand flats, wetlands, sloughs, play lakes or natural ponds.

REGULATORY MECHANISM

Auburn University utilizes the Policy on Storm Water Management Compliance as the regulatory mechanism to prohibit activities on University Land that would be non-compliant with either the Permit or the SWMPP. Auburn University Facilities Management is the responsible for administering the Policy on behalf of the University.

[Policy on Storm Water Management Compliance](#)

CONTROL MEASURES

Storm water management controls or BMPs will be implemented to prevent pollution in storm water discharges from Auburn University's main campus. The Permit requires BMPs addressing five minimum control measures to be part of the SWMPP. These BMPs are described in the remaining subsections of this section with applicable measurable goals and scheduled implementation dates for each BMP.

The five control measures addressed by this SWMPP include:

- 2.1 Public Education and Public Involvement on Storm Water Impacts
- 2.2 Illicit Discharge Detection and Elimination
- 2.3 Construction Site Storm Water Runoff Control
- 2.4 Post Construction Storm Water Management in New and Redevelopment
- 2.5 Pollution Prevention / Good Housekeeping for Municipal Operations

2.1 Public Education and Public Involvement on Storm Water Impacts

An informed and knowledgeable “community” at Auburn University will be an important factor in the success of this SWMPP to reach its goal of reducing the discharge of pollutants associated with storm water runoff. The effective implementation of this measure will help Auburn University to ensure:

- 1) Greater awareness to the University community of the importance of managing discharges to local receiving waters.
- 2) Greater support from the University community for the storm water management program; and
- 3) Compliance with the requirements of the General NPDES Permit.

The Public Education and Public Involvement on Storm Water Impacts control measure consists of BMPs that focus on the development and promotion of educational materials and efforts designed to inform the public about the impacts that storm water discharges have on local water bodies and to foster community partnerships that provide opportunities for stakeholders to learn more about storm water practices and policies, demonstration projects and assessments of local water quality.

Educational materials, activities and partnerships will be designed and promoted to engage the public to better understand the impacts of storm water pollution, local MS4 efforts as well as to highlight and support measures to reduce the introduction of pollutants in storm water. The measure is expected to reach the constituents within the MS4s permitted boundary (Auburn University’s main campus). An emphasis of these

outreach efforts will be towards the removal of known pollutants from storm water to include floatables, pathogens and sediment.

A plan for effectively engaging in Public Education and Public Involvement on Storm Water Impacts is presented below as required by the Permit.

Target Audience

Auburn University has a unique opportunity to reach several distinct target audiences throughout the year. These audiences include Auburn University faculty and staff, students, parents of students, visitors, contractors on campus, and surrounding community stakeholders.

Pollutants of Concern

Primary storm water pollutants of concern for Auburn University include pathogens as listed on the 2010 303(d) list for Parkerson Mill Creek, floatables i.e. litter from improper trash disposal, and sediment from land disturbing activities and in-stream erosion processes.

Communication Mechanisms

Communication of storm water pollution prevention principles will include the following mechanisms AU web sites, interactive campus storm water BMP tour, Auburn News which is an electronic bulletin that reaches the entire student body and all Auburn University employees, representation at various local citizen advisory groups and other state stormwater association meetings, inclusion of storm water and stream information on signage in strategical locations on campus, presentations to student and watershed organizations, continued participation in university-led activities such as Camp War Eagle, Earth Day/Week, Arboretum Game Day events, Office of Sustainability events and efforts, Alabama Cooperative Extension Services (ACES) initiatives, multiple academic research and educational initiatives, student service events (i.e. Big Event, IMPACT) and various social medial platforms.

Responsible Parties

The Public Education and Outreach measure development and implementation will be overseen by a partnership between the University Water Resources Center, the Office of Sustainability, Facilities Management – Waste Reduction and Recycling, and the Department of Risk Management and Safety (RMS).

Measurable Outcomes and Evaluation

Effectiveness of the activities related to this measure will be measured through:

1. Number of presentations delivered – various AU programs will provide at a minimum of four presentations specific to storm water management annually.
2. RMS maintains the central electronic resource (webpage) to serve as primary reference site for the updated University SWMPP. [RMS-Stormwater](#)
3. Quantify the number of individuals reached through University led activities throughout each reporting cycle. Audience includes students, staff, employees and visitors to Auburn University and is targeted at 2500 individuals each reporting cycle.
4. Number of University led PMC cleanup efforts. AU aims to promote three cleanup events throughout each reporting cycle.
5. Documented attendance to regular local, State and regional association meetings and/or programs.
6. Continued attendance, partnership, or participation in Alabama Water Watch monitoring workshops.

2.2 Illicit Discharge Detection and Elimination

Per the Permit, an Illicit discharge is defined at 40 CFR Part 122.26(b)(2) and refers to “any discharge to an MS4 (municipal separate storm sewer system) that is not composed entirely of storm water ...” Exceptions include NPDES permitted discharges and discharges resulting from fire-fighting activities. Some examples of illicit discharges include sanitary wastewater, effluent from septic tanks, car wash wastewaters, improper oil disposal, and radiator flushing disposal, laundry wastewaters, construction site runoff, spills from roadway accidents, and swimming pool discharges (that have not been de-chlorinated). These illicit discharges can enter a storm drain system either through a

direct connection (e.g., a pipe connected directly to the storm drain) or indirectly (e.g., spills, dumped chemicals, cracks in sanitary sewers). As a result, inadequately treated wastes potentially containing high levels of pollutants, such as heavy metals, oil and grease, toxics, viruses, and bacteria, are discharged into the MS4 and ultimately to the Waters of the State. The next subsections describe Auburn University's current program to detect and eliminate both direct and indirect illicit discharges into the storm drain system and associated plans for the permit term.

Regulations require identification and elimination of all non-storm water discharges and appropriate responses to protect the campus community and the environment. Auburn University relies upon multiple methods to identify illicit discharges as quickly as possible. All potential illicit discharges should be reported to Auburn University Risk Management and Safety upon discovery. Discovery and reporting methods include reports conveyed from the campus community to the University's Facilities Management Department by dialing 844-HELP, by utilizing the electronic reporting feature known as "Ask Facilities" or by contacting RMS at 844-4870. Reports might originate from faculty, staff, students, or campus visitors. AU staff with specific training on illicit discharge identification will increase the probability of proper and timely reporting.

Investigation of illicit discharges will commence as soon as practicable but always within 5 working days of the initial discovery or report. Investigation and mitigation measures are implemented upon detection to identify possible source(s) of illicit discharges and to either prevent or reduce adverse impacts to the MS4. A written record will be maintained to document each illicit discharge investigation. Record will include the nature of the discharge, possible sources, mitigation, or cleanup measures implemented, any steps taken to prevent similar discharges in the future, and documentation of any ADEM reporting required.

Target Audience

Auburn University has a unique opportunity to reach several distinct target audiences throughout the year. These audiences include Auburn University faculty and staff, students, parents of students, visitors, contractors on campus, and surrounding community stakeholders.

Responsible Parties

The Illicit Discharge Detection & Elimination measure development and implementation will be overseen by a partnership between the Auburn University Facilities Management, RMS and the University Water Resource Center.

Measurable Outcomes and Evaluation

1. Update map of all campus storm water outfalls. As required by Section III(b)(i) of the Permit, Auburn University will provide annual updates of the map to ADEM by May 31st each year.
2. Promote illicit discharge detection and elimination program/elements at a minimum of four training/educational efforts.
3. Continue bacteriological monitoring to identify possible sources of impairment.
4. Perform and document annual dry weather screening/outfall inspections. Evaluate all outfalls to PMC during each reporting cycle.
5. Continue to investigate and prioritize repair or replacement of suspect infrastructure.
6. Evaluate IDDE Standard Operating Procedure (SOP).

Auburn University

Illicit Discharge Detection and Elimination

Standard Operating Procedure

1. Purpose of Standard Operating Procedure:
 - A. To improve the quality of surface water and ground water within the watershed areas owned and maintained by Auburn University by preventing illicit discharges and illicit connections.

- B. To prevent the discharge of contaminated storm water runoff from Auburn University properties and operations into the storm drainage system and Parkerson Mill Creek.
- C. To comply with the requirements of Auburn University storm water permit.
- D. To comply with all United States Environmental Protection Agency and State laws applicable to storm water discharges.

2. Definitions

An Illicit Discharge is the discharge of pollutants or non-storm water materials to the storm drainage system via overland flow or direct dumping of materials into a catch basin or inlet. Examples of illicit discharges include overland drainage from car washing or cleaning paint brushes in or around a catch basin.

An Illicit Connection is the discharge of pollutants or non-storm water materials into the storm drainage system via a pipe or other direct connection. Sources of illicit connections may include sanitary sewer taps, wash water from laundry facilities, wash water from sinks, or other similar sources.

3. Illicit Discharges

No University employee, student, visitor, contractor, department, or unit shall cause or allow discharges into the Auburn University storm drainage system which are not composed entirely of storm water, except for the allowed discharges listed in Section 5.

Prohibited discharges include but are not limited to: oil, anti-freeze, grease, chemicals, wash water, paint, animal waste, garbage, and litter.

4. Illicit Connections

The following connections are prohibited, except as provided in Section 5 below: Any drain or conveyance, whether on the surface or subsurface, which allows any non-storm water discharge, including but not limited to sewage, process water, wastewater, or wash water, to enter the storm water drainage system, and any connections to the storm drain system from indoor drains or sinks.

5. Allowed Discharges

The following discharges to the storm drainage system are allowed:

- A. Discharges that are specifically permitted under a State or federal stormwater program.
- B. Incidental non-storm water discharges which do not significantly contribute to the pollution of Auburn University surface waters and are limited to the following:

- Water line flushing
- Reclaimed water line flushing
- Landscape irrigation, including but not limited to reclaimed water
- Diverted stream flows
- Rising groundwater
- Uncontaminated groundwater infiltration
- Uncontaminated pumped groundwater
- Discharges from potable water sources
- Foundation drains
- Air conditioning condensate (that does not contain biocide)
- Springs
- Water from crawl space pumps
- Footing drains
- Flows from riparian buffers and wetlands
- De-chlorinated swimming pool discharges
- Flows from emergency firefighting
- Building wash water without detergents, cleaners, or corrosive additives.

C. If Auburn University determines that any of the above discharges contribute to pollution of campus streams or other surface waters or is notified by a State or federal government agency, such as the Alabama Department of Environmental Management, that the discharge must cease, Auburn University will instruct the responsible person to cease the discharge.

D. When instructed to cease the discharge, the discharger of substances newly classified as pollutants shall cease the discharge immediately and be given reasonable time to make corrections so that the discharge will not continue.

E. Nothing in this SOP shall affect a discharger's responsibilities under federal or State law.

6. Enforcement and Penalties

A. The Policy on Stormwater Management Compliance serves as the regulatory mechanism to prohibit activities on University land that would be non-complaint with either Permit or the Stormwater Management program. In the event of non-compliant activity by an organizational unit of the University, the appropriate

chain of command will be notified to bring the activity back into compliance. In the event of intentional non-compliant activity by a student(s), the Code of Student Discipline may apply. For intentional non-compliant activities by a University employee(s), progressive discipline measures may apply. For intentional or negligent non-compliant activities resulting from a University Contractor, work stoppage, formal project review, and appropriate corrective actions may apply.

Corrective actions may require without limitation:

- i. The performance of monitoring, analyses, and reporting;
- ii. The elimination of prohibited discharges or connections;
- iii. Cessation of any violating discharges, practices, or operations;
- iv. The abatement or remediation of storm water pollution or contamination hazards and the restoration of any affected property;
- v. Payment of any fee, penalty, or fine assessed against Auburn University to cover remediation cost;
- vi. The implementation of new storm water management practices; and
- vii. Disciplinary action up to and including dismissal, where appropriate.

B. Notification will establish a time limit for correction of these violation(s). Said notice may further advise that, if applicable, should the violator fail to take the required action within the established deadline, then Auburn University Department of Risk Management & Safety will initiate work orders for the appropriate corrective actions and the individual or University department will be charged for the cost.

7. Dry weather outfall inspection and monitoring

Auburn University shall, at a minimum, visually inspect PMC all outfalls during dry weather conditions each reporting cycle. Flows suspected of containing illicit discharges due to the presence of odors, colors or sheens shall be investigated. Investigation may include water chemistry field testing and/or bacteriological sampling and will be dependent upon the characteristics of the observed discharge. Investigations may involve Facilities Management, Risk Management and Safety and AU Water Resource Center resources to trace source of suspect illicit discharge. Upon source discovery, measures will be implemented to cease discharge immediately as possible. Should immediate cessation not be practicable, a schedule will be developed. Should the source of discharge be

determined to originate off campus, the MS4 community having jurisdiction will be notified within 24 hours as well as the Department. The physical condition of the outfall shall also be noted during the inspections. Compromised outfall structures requiring maintenance will be documented with a work order to correct noted deficiency submitted within 24 hours of its discovery.

8. Promote Illicit Discharge Detection & Elimination SOP

Promotion of this SOP shall be presented to Auburn University community via multiple methods to raise awareness via various means.

2.3 Construction Site Storm Water Runoff Control

In accordance with Part III (B) (4) of NPDES Permit No ALR040030, Auburn University developed the Construction Site Storm Water Runoff Control Best Management Practice.

Target Audience

The Construction Site Runoff Control Program was developed for the contractors performing construction activities on campus and to assist AU Facilities Management personnel responsible for managing development on campus. Auburn University has a unique opportunity to reach several distinct target audiences throughout the year. These audiences include Auburn University faculty and staff, students, parents of students, visitors, contractors on campus, and surrounding community stakeholders.

Responsible Parties

Auburn University's Facilities Management is responsible for all construction projects on campus and implementation of this measure.

Auburn University Design and Construction Standards serve as the University's regulatory mechanism for the Construction Storm Water Control Program and were recently revised to strengthen the storm water management efforts on all University construction sites including the following sections.

Section G10 – Site Preparation

[2022-Design-Standards-Binder-Final.pdf \(auburn.edu\)](#)

Section G10 of the Design and Construction Standards was modified to provide the Contractor a contractual responsibility to meet the objectives of the General NPDES Permit. This section requires that the Contractor:

- Meet the requirements outlined in the Alabama Handbook for Erosion and Sediment Control and Storm Water Management of Construction Sites and Urban Areas.
- Demonstrate compliance with ALR100000 Notice of Intent requirements prior to initiating any earthwork at the site with use of the “AU Land Disturbance Authorization” form contained in the contract Front End documents.
- Prior to requesting Termination of Coverage per ALR100000 from the State, the Contractor shall provide AU a completed “Notice of Intent to Close Permit” form to obtain concurrence from AU.
- Require turbidity monitoring at specified construction sites to ensure that site runoff not result in an increase of 50 NTU turbidity standards.

Auburn University will conduct routine turbidity monitoring at specified sites to determine the effectiveness of the on-site controls design, installation, and maintenance. Construction contracts administered by Facilities Management further identify the procedures that will be taken by the Auburn University should NPDES non-compliance be identified to include withholding payment and notification to ADEM.

Measurable Outcomes and Evaluation

1. Perform in-house construction site inspections monthly and in general accordance with Contractor’s NPDES Permit responsibilities.
2. Perform annual training erosion and sedimentation training to AU designers and project managers to better understand the G10 requirements.
3. Continue in-house turbidity monitoring of select sites to quantify sedimentation impacts.

2.5 Post Construction Runoff Control

The post construction runoff control measure is designed to ensure that new construction designs do not result in increased storm water pollution.

Development can alter landscapes by increasing impervious areas (i.e., roofs, driveways, parking lots) and changing drainage patterns, thereby increasing the storm water rate, volume and velocity of runoff from a site. This can lead to degradation of receiving waters and increases in the occurrence of flooding. Storm water from developed impervious areas can also contain a variety of pollutants that are detrimental to water quality, such as sediment, nutrients, heavy metals, pathogenic bacteria, and petroleum hydrocarbons.

The goal of post-construction storm water management is “to reduce runoff volume and improve water quality by replicating the natural hydrology and water balance of the site, based on historical conditions and undeveloped ecosystems in the region.” LEED v4 Our intention is to develop storm water management designs in a manner best replicating natural site hydrology processes. New projects on campus shall address water quality and quantity impacts early in the design process to provide long-term water quality benefits. The implementation of Green infrastructure BMP designs that reduce impervious surfaces, provide water filtering services and encourage infiltration is preferred. New projects offer many opportunities to reduce storm water runoff from the site.

To meet the requirements of Part III B5 of the Permit, Auburn University developed a Campus Landscape Master Plan (CLMP) as part of the overall Comprehensive Campus Master Plan. The Master Plan is approved by the Board of Trustees and serves as the mechanism to ensure that the objectives of the CLMP are achieved. The CLMP embraces a sustainable environment, including an emphasis on Low Impact Development and Green Infrastructure approaches to storm water management that incorporate best management practices for maintenance and implementation schedules, as well as campus watershed restoration opportunities.

The Design and Construction Standards performance requirements state a project is to

not increase peak storm water flows for the 2-, 5-, 10-, and 25-year storm events as well as provide water quality treatment for the first 1.2 inches of rainfall with an 80 percent Total Suspended Solids (TSS) reduction goal. Projects are also encouraged to reduce overall storm water runoff volume by reducing impervious cover campus wide and promotion of infiltration.

Responsible Parties

Auburn University's Facilities Management is responsible for the implementation of the CLMP and implementation of this measure.

Measurable Outcomes and Evaluation

1. Provide training to AU Design Leads, maintenance personnel, and others on AU storm water management preferences, updated Design Standards / Post Construction Storm Water Manual.
2. All new and redeveloped AU properties shall develop a storm water management plan to comply with the Design and Construction Standards. A report documenting the implementation or consideration of Low Impact Development and Green Infrastructure shall be reviewed per the Post Construction Storm Water Manual by Facilities Management.

2.6 Pollution Prevention / Good Housekeeping for Municipal Operations

Efforts to survey University activities and facilities will continue. These surveys focus on the storage of materials at the variety of areas managed by Facilities Management, Auxiliary Operations, various academic departments, and AU Athletic Department.

Part III.B.5.a. of the Permit requires Auburn University to inventory "municipal facilities" including municipal facilities that have a potential to discharge pollutants via storm water runoff, develop strategies to reduce litter, floatables and debris from entering the storm sewer system from these facilities, develop SOPs detailing good housekeeping practices to be employed at the appropriate municipal facilities, develop an inspection program to

evaluate these operations and to develop a good housekeeping training program for municipal facility staff as outlined in the SOP.

Standard Operating Procedure

Municipal Facilities have been inventoried and are listed below. Due to the activities conducted at these facilities and because of the potential to introduce pollutants to the University's MS4, have been identified as "Municipal Facilities" and fall subject to this SOP. Implementation requires inspection of the municipal facility by the responsible AU entity. All discharges will cease upon discovery as possible. The responsible AU entity Supervisor will be notified of all discharges upon discovery. All discharge(s) and/or potential discharge(s) and the subsequent corrective measures taken will be documented be documented, and recommended corrective measures taken immediately. Record of inspection will be maintained by AU for a period of three years and will be made available for internal and external audit.

MS4 Municipal Facility Inspection SOP:

I. PURPOSE

This document provides standard operating procedures (SOP) for performing municipal facility inspections in accordance General NPDES Permit No. ALR040030 Part III.5.a.iii.

II. OBJECTIVE

The purpose of the procedure is to prevent or minimize to the maximum extent practicable (MEP) pollutants from being discharged from these "municipal facility" locations/operations into Auburn University's MS4.

III. SCOPE

RMS will perform Inspections at these facilities annually with reinforcement provided through annual training and/or consultation. Regular inspections will assess the impacts of AU operations at these facilities that may include but not be limited to:

Equipment Washing	Street Sweeping	Road Maintenance	Waste Management
Vegetation Control	Fleet Maintenance	External Building Maintenance	Material Storage

Should stormwater concerns be identified during the inspection, measures will be taken in cooperation with RMS and the responsible group as possible.

Inventory of Municipal Facilities

Facilities Management	Athletics
Auto/Small Engine Shop	Plainsman Park
Fleet Fueling Station	Jordan Hare Stadium
Materials Management	Soccer Complex
Landscape Services	Jane B. Moore Softball Complex
Facilities Management Yard	Hutsell Rosen Track
Chilled Water Plant I	Auburn Arena
Chilled Water Plant II	Watson Field House
Chilled Water Plant III	Football Performance Facility (under construction)
District Energy Plant	
Hot Water Plant I	Risk Management & Safety
Hot Water Plant II	Environmental Health & Safety I
Satellite Steam Plant	Environmental Health & Safety II
44 kV Substation	Environmental Health & Safety III
115 kV Substation	Pathological Waste Incinerator
Student Affairs	
Foy Dining (CD)	
Village Dining (CD)	
Student Center (CD)	
Terrell Hall Dining (CD)	
Wellness Kitchen (CD)	
Sports Plex (CR)	
Intramural Field House/Equipment Pole Barn (CR)	

CD: Campus Dining

CR: Campus Recreation

GL: Greek Life

MS4 Municipal Facility Inspection:

Facility Information			
Facility Name:			
Facility POC:		Phone Number:	
Date of Inspection:		Inspectors:	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Is site free from litter and debris?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e., not open, deteriorating, or leaking)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite, and personnel are aware of spill procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Measurable Outcomes & Evaluation:

1. Quantify regulated and non-regulated waste management and minimization volumes from campus operations.
2. Perform and document “municipal facility” annual inspections.
3. Provide and document annual pollution prevention training to municipal facility personnel.
4. Update “municipal facility” inventory annually.

Responsible Department:

Auburn University RMS, Facilities Management, Office of Student Affairs and Athletics

Spill Prevention Control and Countermeasure (SPCC) Program

AU RMS has developed and maintains the campus SPCC Plan. The Plan calls for the proper storage and management of oil containing equipment. The SPCC Plan identifies the procedures to be followed to regularly (monthly) inspect applicable containers and instructs “oil handling personnel” on the appropriate measures to take in the event of a spill.

Measurable Outcomes and Evaluation:

1. Document the number of inspections performed on regulated storage units on an annual basis (SPCC).
2. Document the number of preventive maintenance procedures performed on tanks, valves, pumps, pipes, and other equipment.
3. Document the number of training presentations performed and the number of employees trained annually.

4. Document the annual volume of used oil managed by AU.

Responsible Department:

AU RMS & Facilities Management

Monitoring Plan for Pathogen Impairment

In accordance with Part V of the Permit, AU will continue to evaluate Parkerson Mill Creek (PMC) Watershed for its pathogen impairment. PMC is in Lee County; the watershed is part of the Chewacla Watershed, in the lower Tallapoosa River Basin. The 9.3 square mile (5,981 acres) watershed contains 21,000 meters (68,500 ft.) of main stem perennial stream and approximately 86,000 meters (282,152 ft.) of tributary stream length. The stream network empties into Chewacla Creek, just south of the H.C. Morgan Water Pollution Control Facility. The watershed includes the City of Auburn, Auburn University and the surrounding areas. The headwaters of PMC are approximately 3,000 meters (9,845.5 ft.) in length and are located on the campus of Auburn University. In 2007, ADEM listed PMC as impaired on Alabama's 303(d) List of Impaired Waters for pathogens from point source and non-point sources, primarily urban runoff and storm sewer connections. As such, AU regularly monitors PMC by performing bacteriological analysis through the AU Water Resource Center's Alabama Water Watch (AWW) program. The results of the monitoring effort will be reported with the submission of the annual report. Collaboration with the City of Auburn will continue as both entities contain and have influence on this watershed.

REVIEW AND UPDATING SWMPP

AU will review the SWMPP annually in conjunction with the preparation of the annual report required under Part IV, Section B of the General Permit.

The annual report will be submitted to the ADEM for each year of the permit term. Reports are due to ADEM by May 31st of each year and will cover activities for the previous reporting period (April 1- March 31).

The reports consist of:

- Compliance status including:
 - Assessment of the appropriateness of the BMPs
 - Progress towards achieving statutory goals of reducing the discharge of pollutants and protecting water quality.
 - Measurable goals for each of the minimum control measures
- Results of information collected and analyzed, if any, during the reporting period.
- Any changes made to the SWMPP since the last annual report and a summary of the storm water activities AU plans to initiate during the next reporting cycle.
- Proposed changes to the SWMPP
- Description and schedule for implementation of additional BMPs that may be necessary based on monitoring results.
- Monitoring data

Annual reports are signed by the Stormwater Executive Committee and facilitated by Risk Management and Safety.

Appendix B

Policy on Storm Water Management Compliance

April 1, 2024, through March 31, 2025

POLICY ON STORMWATER MANAGEMENT COMPLIANCE

I. POLICY STATEMENT

Auburn University ("The University") shall manage its stormwater in compliance with the National Pollutant Discharge Elimination System (NPDES) General Permit ALR040030 ("The Permit"), or subsequent permits, and the University's Stormwater Management Plan.

II. POLICY PRINCIPLES

A. The University's "Policy on Stormwater Management Compliance" governs the University's Stormwater Management Program. This Policy guides the University in administering the requirements and procedures of the Permit as required of the University and as administered by the Alabama Department of Environmental Management (ADEM).

B. Regulatory Background:

1. The United States Environmental Protection Agency (EPA) and ADEM have designated the University as an owner/operator of a Phase II municipal separate storm sewer system (MS4). The EPA's Clean Water Act Phase II Stormwater Regulations (implemented March 2003) require operators of regulated Phase II MS4s to obtain an NPDES permit and to develop a stormwater management program designed to protect water quality and to prevent harmful pollutants in stormwater runoff from being discharged into the MS4.
2. The intent of the Clean Water Act Phase II regulations is to reduce adverse impacts to water quality and aquatic habitat by instituting the use of best management practices on sources of stormwater discharges not regulated by other measures. In order to comply with the Clean Water Act Phase II regulations, the University must satisfy six "minimum control measures," including:
 - a. Public Education and Outreach
 - b. Public Participation/Involvement
 - c. Illicit Discharge Detection and Elimination
 - d. Construction Site Runoff Control
 - e. Post-Construction Stormwater Management
 - f. Pollution Prevention/Good Housekeeping
3. Parkerson Mill Creek was determined to be "Impaired Water" and consequently placed on the ADEM 303(d) list of impaired and threatened waters ("303(d) list") in 2008 and 2010. Known water quality concerns have been identified as pathogens resulting likely from urban runoff and sewer cross connections. A Total Daily Maximum Load (TMDL) for Parkerson Mill Creek was issued by ADEM in September 2011. Implementation of this stormwater TMDL was addressed in the Permit.

- C. A University Stormwater Management Plan (SWMP) has been created and annually updated since 2009. The SWMP was created in compliance with EPA and ADEM requirements as identified in the Permit and in concert with the Campus Master Plan, the Landscape Master Plan and the Policy for Natural Resource Management. The SWMP details the measures that are to be taken to meet the six minimum control measures identified above, identifies the University entity(s) having responsibility towards each measure and the metrics to evaluate their effectiveness.
- D. It is University policy that all stormwater shall be managed in accordance with the SWMP and that all University organizations and non-University organizations operating on University's main campus shall conduct their operations and activities in compliance with this plan.

III. **EFFECTIVE DATE**

This policy is in affect as of June 15, 2016.

IV. **APPLICABILITY**

This policy applies to all University organizations, as well as all University operations, construction projects, and other campus activities.

V. **POLICY MANAGEMENT**

Responsible Office: Auburn University Facilities Management

Responsible Executive: Executive Vice President, Auburn University

Responsible Officer: Associate Vice President, Facilities

VI. **DEFINITIONS**

303(d) List: List of impaired and threatened waters (stream/river segments, lakes) that the Clean Water Act requires all states to submit for EPA approval every two years on even-numbered years. States identify all waters where required pollution controls are not sufficient to attain or maintain applicable water quality standards, and establish priorities for development of TMDLs based on the severity of the pollution and the sensitivity of the uses to be made of the waters, among other factors. States then provide a long-term plan for completing TMDLs within 8 to 13 years from first listing.

ADEM: Alabama Department of Environmental Management, the governing body responsible for enforcing environmental regulations in the State of Alabama.

Best Management Practices (BMP): Activities or structural improvements that help reduce the quantity and improve the quality of stormwater runoff. BMP include treatment requirements, operating procedures, and practices to control site runoff, spillage or leaks, sludge or waste disposal, or drainage from raw material storage.

Campus Master Plan: As stipulated in the University's "Campus and Capital Projects Planning Policy," the Campus Master Plan "is a physical plan and comprehensive set of policy directives that together provide long-range strategies for the growth and development of the Auburn University campus." The Campus Master Plan is updated periodically, as required, and the Board of Trustees reviews and approves all changes.

Campus Master Plan Land Use Element: The chapter of the Campus Master Plan that establishes formal Land Use Categories and Land Use Area boundaries that define permitted uses for all University Land.

Clean Water Act (CWA): Act passed by the United States Congress to control water pollution, formally called the Federal Water Pollution Control Act of 1972 or Federal Water Pollution Control Act Amendments of 1972.

Environmental Protection Agency (EPA): United States agency responsible for protecting human health and the environment.

Executive Facilities Committee: Appointed by the President, a senior group of University Administrators, representing major facility stakeholders, that considers and formulates recommendations for the President, regarding campus facility plans and programs.

Landscape Master Plan (LMP): Developed as a component, or sub-plan, of the Campus Master Plan, the LMP provides prescriptive requirements of a design approach that will guide the University toward implementation and realization of the landscape vision for the Auburn campus. The LMP document aids in defining the project scope of each campus project that affects Auburn University exterior facilities and provides tools designed to ensure that each project is viewed within its larger campus context and contributes to the success of the larger campus landscape.

Master Plan Committee: A representative committee appointed by the President that provides input regarding facilities, planning, transportation planning, land planning, infrastructure, and site development activities. The Committee also provides input on the continuing administration, maintenance, implementation, change, and updating of the Campus Master Plan.

Municipal Separate Storm Sewer System (MS4): is a conveyance or system of conveyances owned by a state, city, town, village or other public entity that discharges to waters of the U.S.

Natural Resource Management Area (NR): The Campus Master Plan Land Use Category and Land Use Area, identified on the Campus Master Plan as "NR," that identifies areas of the campus that are designated for natural resource protection and enhancement with limited development potential. NR areas include land located on either side of Parkerson Mill Creek and Town Creek and their tributaries, FEMA 100- year floodplains, wetlands, streams, steep slopes, and critical buffer zones.

NPDES: National Pollutant Discharge Elimination System. The national program for issuing, modifying, revoking, reissuing, terminating, monitoring, and enforcing permits and for imposing and enforcing pretreatment requirements under sections 307, 318, 402, and 405 of the Clean Water Act (CWA).

Parkerson Mill Creek: One of two principal stream systems, including all tributaries and main channel streams, that flows on the University main campus (see appendix 1); a tributary of Chewacla Creek, which flows into the Tallapoosa River.

Parkerson Mill Creek Watershed: Area of land on the University main campus that drains the tributaries, main channel, stream banks, and floodplain of Parkerson Mill Creek (see appendix 1).

Pathogens: Microorganisms that can cause disease in other organisms or in humans, animals, and plants. They may be bacteria, viruses, or parasites and are found in sewage, in runoff from animal farms or rural areas populated with domestic and/or wild animals, and in water used for swimming. Fish and shellfish contaminated by pathogens, or the contaminated water itself, can cause serious illnesses.

Permit: The National Pollutant Discharge Elimination System (NPDES) General Permit ALR040030 issued to Auburn University.

Policy for Natural Resource Management: University policy that implements the Campus Master Plan Land Use Element as it relates to University Land designated as natural resource protection and enhancement areas with limited development potential, including the protection, enhancement, and restoration of Parkerson Mill Creek, Town Creek, and the tributaries within their watersheds on the main campus.

Stormwater: Runoff occurring when precipitation flows over the ground. Impervious surfaces like driveways, sidewalks, and streets prevent stormwater runoff from naturally soaking into the ground. These discharges often contain pollutants in quantities that could adversely affect water quality. Federal regulations require permits for stormwater discharges associated with industrial activity, construction projects (disturbing one or more acre of land) and MS4s. These permits require controls to reduce the transport of pollutants in storm water to waters of the United States.

Stormwater Management Plan (SWMP): University plan developed for the implementation of NPDES permit requirements.

Stormwater Management Program: University plans, procedures and practices required by EPA and ADEM to obtain NPDES MS4 permit and NPDES construction stormwater permits for construction projects (disturbing one or more acre of land).

Stormwater Pollutant: Chemicals, sediment, trash, disease-carrying organisms, and other contaminants picked up by stormwater as it runs off roofs and roads into rivers, streams and other water bodies. Studies show that stormwater pollution rivals sewage plants and large factories as a source of damaging pollutants in drinking water and at water bodies.

TMDL: Total Maximum Daily Load designates the calculated maximum amount of pollutant that a body of water can receive and still safely meet water quality standards. TMDL= Wasteload Allocation (NPS) + Load Allocation (PS) + Margin of Safety.

Town Creek: One of two principal stream systems, including all tributaries and main channel streams that flow on the University main campus (see appendix 1); a tributary of Chewacla Creek, which flows into the Tallapoosa River.

Town Creek Watershed: Area of land on the Auburn University main campus that drains the tributaries, main channel, stream banks, and floodplain of Town Creek (see appendix 1).

University Land: All land owned or leased by Auburn University.

VI POLICY PROCEDURES

- A. Auburn University Facilities Management ("Facilities Management") will administer this policy on behalf of the University.

- B. The University's Department of Risk Management and Safety is primarily responsible for reporting the University's compliance efforts, maintaining the University's SWMP and facilitating progress with other University groups that have responsibility towards the Permit's overall objective
- C. Facilities Management shall establish a Stormwater Management Committee (SWMC) as a subcommittee of the Master Plan Committee. The SWMC shall:
 - 1. Develop, implement, and maintain a Stormwater Management Program to, comply with the Permit, at a minimum, with a goal to have Parkerson Mill Creek removed from the 303(d) list between 2016 and 2021 consistent with 303d list guidelines;
 - 2. Review and update the SWMP as needed;
 - 3. Develop a checklist to ensure compliance with this policy and the management plans described herein.
- D. The SWMC will include members from the Master Plan Committee as well as additional ad hoc representatives, to include, but not limited to, the Alabama Cooperative Extension System; Athletics Department; Campus Planning; College of Agriculture; College of Sciences and Mathematics; Design and Construction; Housing & Residence Life; Landscape Services; the Office of Risk Management and Safety; the Office of Sustainability; the School of Forestry; and Division of Student Affairs.

VI. SANCTIONS

This Policy serves as the regulatory mechanism to prohibit activities on University Land that would be non-compliant with either the Permit or the Stormwater Program.

In the event of non-compliant activity by an organizational unit of the University, the appropriate chain of command will be used to bring the activity back into compliance or cause it to stop. In the event of intentional non-compliant activity by a student(s), the Code of Student Discipline may apply. For intentional non-compliant activities by a University employee(s), progressive discipline measures may apply. For intentional or negligent non-compliant activities resulting from a University Contractor, work stoppage, formal project review, and appropriate corrective actions may apply.

IX. EXCEPTIONS

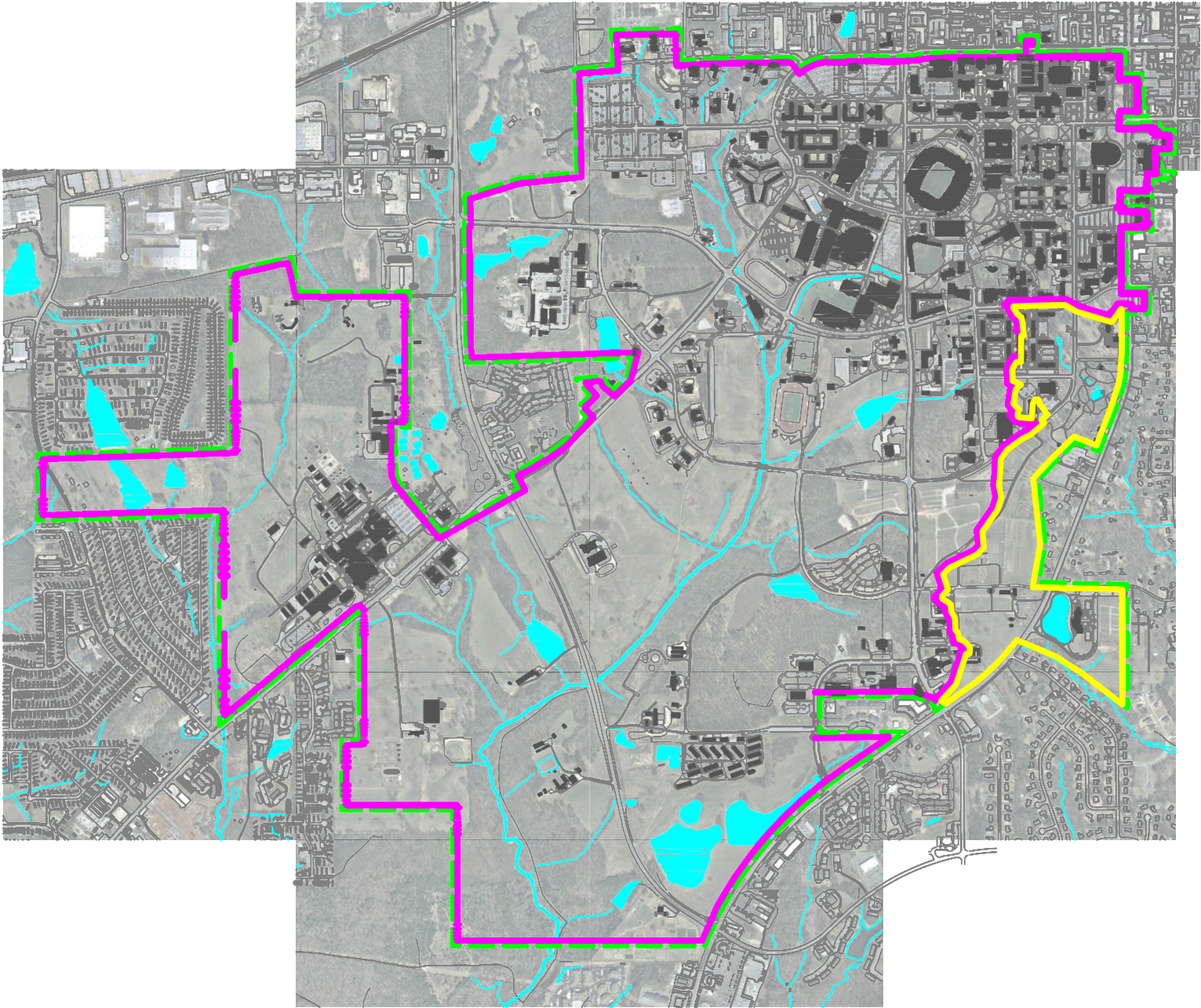
This policy applies to the Auburn University main campus. All other University Land is exempt.

X. INTERPRETATION


The Responsible Officer is authorized to interpret questions and issues regarding the requirements and applicability of this policy.

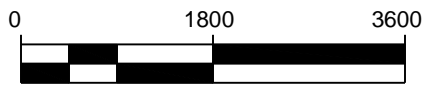
ADOPTED: June 15, 2016

APPENDIX1



LEGEND

-  AUBURN UNIVERSITY
MAIN CAMPUS BOUNDARY
-  PARKERSON MILL
CREEK WATERSHED
-  TOWN CREEK
WATERSHED



SCALE:1:1800

Appendix C

Illicit Discharge Detection & Elimination

Outfall Reconnaissance Inventory (ORI) Field Sheets

April 1, 2024, through March 31, 2025

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>Pme</u>		Outfall ID: <u>SW No4-09</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>0930 hrs</u>	
Investigators:		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>44°</u>	Rainfall (in.): Last 24 hours: <u>Ø</u> Last 48 hours: <u>Ø</u>		
Latitude: <u>N 32° 36' 11.73"</u>	Longitude: <u>W 86° 29' 32.73"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input checked="" type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>72x96</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>Annual</u>			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 – Faint	<input type="checkbox"/> 2 – Easily detected	<input type="checkbox"/> 3 – Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:			
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 – Faint colors in sample bottle	<input type="checkbox"/> 2 – Clearly visible in sample bottle	<input type="checkbox"/> 3 – Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 – Slight cloudiness	<input type="checkbox"/> 2 – Cloudy	<input type="checkbox"/> 3 – Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 – Few/slight, origin not obvious	<input type="checkbox"/> 2 – Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 – Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Floatables <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>Pmc</u>		Outfall ID: <u>SW N04-11</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>0935 hrs</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>44°</u>	Rainfall (in.):	Last 24 hours: <input checked="" type="checkbox"/>	Last 48 hours: <input checked="" type="checkbox"/>
Latitude: <u>N32° 36' 11.34"</u>	Longitude: <u>W85° 29' -50.52"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input checked="" type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			
<u>OUTFALL → UTILITY BARN EXTENSION LOOP</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> PRCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 – Faint	<input type="checkbox"/> 2 – Easily detected	<input type="checkbox"/> 3 – Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Floatables <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>pme</u>		Outfall ID: <u>SW N04-09</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>0930 hrs</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>Mike Freeman</u>	
Temperature (°F): <u>54 44</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 36' 11.73"</u>	Longitude: <u>W85° 29' 52.72"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input checked="" type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS
<u>X</u> <u>10' x 10'</u>	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> Circular	<input checked="" type="checkbox"/> Single	Diameter/Dimension: <u>72 X 96</u>
	<input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Other: _____	<input type="checkbox"/> Teeble <input type="checkbox"/> Teeple <input type="checkbox"/> Other: _____	
	<input type="checkbox"/> Rip-rap <input type="checkbox"/> Other: _____		Depth: _____ Top Width: _____ Bottom Width: _____
<input type="checkbox"/> In-situ (when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>		
Flow Description (if present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>Annual</u>		

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS			
PARAMETER	RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume		Liter
	Time to fill		Sec
<input type="checkbox"/> Flow #2	Flow depth		In
	Flow width		Ft, In
	Measured length		Ft, In
	Time of travel		S
Temperature		°F	Thermometer
pH		pH Units	Test strip/Probe
Ammonia		mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☐ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW N04-11</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>0935 hrs</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>44°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 36' 11.38"</u>	Longitude: <u>W85° 29' 50.55"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input checked="" type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			
<u>OUTFALL -> UTILITY BARN Extension Loop</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> <u>Hard Pipe</u>	<input checked="" type="checkbox"/> RCPC <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____ <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully Submerged: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earth <input type="checkbox"/> Rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> Stream	(applicable when collecting samples)			
Flow present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S.	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Recorder Laboratory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Gray <input type="checkbox"/> Red	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil slicks) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Rust	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Colors <input type="checkbox"/> Odors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Flammable <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW NOS-02</u>	
Today's date: <u>12/19/24</u>		Time (Military): <u>0945</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>45°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N 32° 36' 08.62"</u>	Longitude: <u>W 85° 29' 50.58"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <div style="text-align: center; font-size: 1.2em; font-family: cursive;">EXTENSION LOOP</div>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <div style="font-size: 1.5em; font-family: cursive;">24</div>	In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Inventory Field Sheet

Outfall Record

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No)

INDICATOR	CHECK if Present	DESCRIPT	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Petrol	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Red	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet paper, etc.) <input type="checkbox"/> Petroleum (oil, grease, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Present, but not obvious	<input type="checkbox"/> 2 - Some indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Patch <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely
 ☐ Potential (presence of two or more indicators)
 ☐ Suspect (one or more indicators with a severity of 3)
 ☐ Obvious

Section 7: Data Collection

- Sample for the lab? ☐ Yes ☒ No
- If yes, collected from: ☐ Flow ☐ Pool
- Intermittent flow trap set? ☐ Yes ☐ No (If Yes, type: ☐ OBM ☐ Caulk dam)

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>SW NOS-08</u>	
Today's date: <u>12/19/24</u>		Time (Military): <u>1000hrs</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>46°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N36° 36' 07.83"</u>	Longitude: <u>W85° 29' 55.41"</u>	GPS Unit:	GPS LMK #:
Camera:	Photo #s:		
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input checked="" type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>Henlock Dr.</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>48</u>	In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other: _____			
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	<input type="checkbox"/> Other: _____
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Colors <input type="checkbox"/> Odors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae	<input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other: _____
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other: _____	
Pipe benthic growth	<input type="checkbox"/>		

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (title of more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW N05-09</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>1010</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>46°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 06' 18"</u>	Longitude: <u>W85° 29' 50.76"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input checked="" type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>18"</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER		RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			1 - Faint	2 - Easily detected	3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint	<input type="checkbox"/> Other
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input checked="" type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	120N

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Veg. | VINES

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>RME</u>		Outfall ID: <u>N 05-10</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>1020 hrs</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>47°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 36' 08.52"</u>	Longitude: <u>N 85° 29' 51.32"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>18"</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With sediments: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Recontamination Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Fecculables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>Pine</u>		Outfall ID: <u>SW N 05-13</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>1025</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>48°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N 36° 36' 08.11"</u>	Longitude: <u>W 85° 29' 55.36"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>18</u>	In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER		RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Patch <input type="checkbox"/> Other
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW N 06-02</u>	
Today's date: <u>12/5/24</u>		Time (Military): <u>1052</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>50°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N32° 36' 04.88"</u>	Longitude: <u>W85° 29' 50.22"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input checked="" type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> SRCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>18"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER		RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>DMC</u>		Outfall ID: <u>P04-30</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>1100</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>51°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N 32° 36' 13.92"</u>	Longitude: <u>W 85° 29' 49.43"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <div style="text-align: center; font-size: 1.2em; font-weight: bold;">FARM HOUSE AREA</div>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>58 X 38</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>YEARLY</u>			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No if Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>P04-31</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>1115</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>53°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 36' 13.46"</u>	Longitude: <u>W 85° 29' 49.40"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>36'</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only
Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls
Are physical indicators that are not related to flow present? ☒ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Other:	<input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>P04-32</u>	
Today's date: <u>12/9/24</u>		Time (Military): <u>1120</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>53°</u>	Rainfall (in.): Last 24 hours: <u>0</u>	Last 48 hours: <u>0</u>	
Latitude: <u>N 32° 36' 13.34"</u>	Longitude: <u>W 85° 29' 49.06"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>48"</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint	<input type="checkbox"/> Other:
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW P04-37</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1129</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>54°</u>	Rainfall (in.): Last 24 hours: <u>0</u>	Last 48 hours: <u>0</u>	
Latitude: <u>N32° 36' 13.83"</u>	Longitude: <u>W85° 29' 49.30"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>60"</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
	<input type="checkbox"/> Open drainage <input type="checkbox"/> Concrete <input type="checkbox"/> Trapezoid <input type="checkbox"/> Earthen <input type="checkbox"/> Parabolic <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____			Depth: _____ Top Width: _____ Bottom Width: _____
<input type="checkbox"/> In-Stream (applicable when collecting samples)				
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER		RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Excessive	<input type="checkbox"/> Other
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae	<input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>P06-05</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1135</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>55°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 36' 19.92"</u>	Longitude: <u>W85° 29' 43.44"</u>	GPS Unit: _____	GPS LMK #: _____
Camera: _____		Photo #s: _____	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): _____			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP	<input checked="" type="checkbox"/> Circular	Diameter/Dimensions: <u>18</u>	In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
	<input type="checkbox"/> PVC <input type="checkbox"/> HDPE	<input type="checkbox"/> Elliptical		
	<input type="checkbox"/> Steel	<input type="checkbox"/> Box	<input type="checkbox"/> Triple	
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete	<input type="checkbox"/> Trapezoid	Depth: _____ Top Width: _____ Bottom Width: _____	
	<input type="checkbox"/> Earthen	<input type="checkbox"/> Parabolic		
	<input type="checkbox"/> rip-rap	<input type="checkbox"/> Other: _____		
	<input type="checkbox"/> Other: _____			
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel		Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint	<input type="checkbox"/> Other:
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>Pme</u>		Outfall ID: <u>P07-16</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1140</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>57°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 35' 56.87"</u>	Longitude: <u>W85° 29' 31.85"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>CORNER @ WIRE and Sanford -> Football Complex</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>18'</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel		Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Rust <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Suds <input type="checkbox"/> Colors <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>P07-17</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1150</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>57°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N32° 35' 56.83"</u>	Longitude: <u>W85° 29' 31.93"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>Football Complex under Sanford</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: _____ In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oil <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>P07-18</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1200</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>60°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N 32° 35' 56.54"</u>	Longitude: <u>W 85° 29' 31.60"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>42'</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Paint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Rust <input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	<input type="checkbox"/> Other:
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Pipe benthic growth	<input type="checkbox"/>		

Section 6: Overall Outfall Characterization

☒ Unlikely
 ☐ Potential (presence of two or more indicators)
 ☐ Suspect (one or more indicators with a severity of 3)
 ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No
 2. If yes, collected from: ☐ Flow ☐ Pool
 3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>P8-08</u>	
Today's date: <u>DEC 09 2021</u>		Time (Military): <u>1705</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>60°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 36' 54.22"</u>	Longitude: <u>W85° 29' 48.82"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>SOUTH OF MCWHORTER</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>15"</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel		Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Rust <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Suds <input type="checkbox"/> Colors <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Infloatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>PO8-12</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1210</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>61°</u>	Rainfall (in.): Last 24 hours: <u>Ø</u> Last 48 hours: <u>Ø</u>		
Latitude: <u>N32° 36' 41.41"</u>	Longitude: <u>W85° 27' 46.87"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>EAST OF SOFTBALL COMPLEX</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> VCP <input type="checkbox"/> PVC <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> CMP <input type="checkbox"/> HDPE <input type="checkbox"/> Eliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Full With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Indistinctly <input type="checkbox"/> Fully
	<input type="checkbox"/> Open drainage <input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____			<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel		Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Rust <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floutables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>P09-02</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1220</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>61°</u>	Rainfall (in.): Last 24 hours: <u>0</u>	Last 48 hours: <u>0</u>	
Latitude: <u>N30°35'50.12"</u>	Longitude: <u>W85°21'47.29"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			
<u>RIGHT OF SOFTBALL INDOOR @ BIGG-0</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	_____ "	Ft, In	Tape measure
	Measured length	_____ "	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Foul <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Suds <input type="checkbox"/> Colors <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Irregularities <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>Pine</u>		Outfall ID: <u>Q03-31</u>	
Today's date: <u>DEC 09 2024</u>		Time (Military): <u>1230</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>61°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 36' 04" 27"</u>	Longitude: <u>W 85° 29' 49.11"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>SIGMA Nu</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>30</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>YEARLY</u>			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☒ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Excessive	<input type="checkbox"/> Other:
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Irregularities <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	<input type="checkbox"/> Other:
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (little or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Ilicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>007-19</u>	
Today's date: <u>DEC 11 2024</u>		Time (Military): <u>0900</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>37°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 35' 53.71"</u>	Longitude: <u>W85° 29' 39.04"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>BIGGIO @ SMFORD</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>8"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream (applicable when collecting samples)				
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Rust <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW Q08-07</u>	
Today's date: <u>DEC 11 2024</u>		Time (Military): <u>0910</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>38°</u>	Rainfall (in.): Last 24 hours: <u>0</u>	Last 48 hours: <u>0</u>	
Latitude: <u>N32° 35' 55.71"</u>	Longitude: <u>W85° 29' 39.04"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply): <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Industrial <input type="checkbox"/> Ultra-Urban Residential <input type="checkbox"/> Suburban Residential <input type="checkbox"/> Commercial </div> <div> <input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Institutional Other: _____ Known Industries: _____ </div> </div>			
Notes (e.g., origin of outfall, if known): <div style="text-align: center; font-size: 1.2em; font-family: cursive;"> <u>SAMPSON BIGGIE (ROUND)</u> </div>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> ORCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>18"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	(Shaded area for submerged open drainage)
<input type="checkbox"/> In-Stream (applicable when collecting samples)				
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>SW R07-13</u>	
Today's date: <u>DEC 11 2024</u>		Time (Military): <u>0920</u>	
Investigators:		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>39°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 35' 58.02"</u>	Longitude: <u>W85° 29' 29.39"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>ROCK WALL</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> PRCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>36"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight origin not obvious	<input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW R07-23</u>	
Today's date: <u>DEC 11 2024</u>		Time (Military): <u>0930</u>	
Investigators: <u>MIKE FIREMAN</u>		Form completed by: <u>MIKE FIREMAN</u>	
Temperature (°F): <u>38°</u>	Rainfall (in.): Last 24 hours: <u>0</u>	Last 48 hours: <u>0</u>	
Latitude: <u>N32° 35' 32.25"</u>	Longitude: <u>W85° 29' 38.00"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial <input type="checkbox"/> Ultra-Urban Residential <input type="checkbox"/> Suburban Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Institutional Other: _____ Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input type="checkbox"/> Circular <input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>36"</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
	<input type="checkbox"/> Open drainage <input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER		RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	_____ "	Ft, In	Tape measure
	Measured length	_____ "	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW R07-15</u>	
Today's date: <u>DEC 11 2024</u>		Time (Military): <u>0935</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>40</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 56.56"</u>	Longitude: <u>W85° 29' 36.35"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <div style="text-align: center; font-size: 1.2em; font-family: cursive;">BIGGIO</div>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input checked="" type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>72"</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>VERY</u>			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:		<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SWP07-16</u>	
Today's date: <u>DEC 11 2024</u>		Time (Military): <u>1000</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>41°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 35' 56.45"</u>	Longitude: <u>W85° 29' 34.04"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial <input type="checkbox"/> Ultra-Urban Residential <input type="checkbox"/> Suburban Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Institutional Other: _____ Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>WATSON FIELD HOUSE</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCPC <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
	<input type="checkbox"/> Open drainage <input type="checkbox"/> Concrete <input type="checkbox"/> Trapezoid <input type="checkbox"/> Earthen <input type="checkbox"/> Parabolic <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____			Depth: _____ Top Width: _____ Bottom Width: _____
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>SW 507-12</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>0930</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>40°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 35' 58.03"</u>	Longitude: <u>W 85° 29' 29.46"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>BEARD EAVES</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> PRCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>48"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>HEAVY</u>			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:			
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW 507-13</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>0935</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>42°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 35' 58.02"</u>	Longitude: <u>W 85° 29' 29.39"</u>	GPS Unit:	GPS LMK #:
Camera:	Photo #s:		
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>BEARD EAVES LARGE BOX</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input checked="" type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>96x72</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>HEAVY</u>			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			1 - Faint	2 - Easily detected	3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW 507-16</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>0940</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>43°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 35' 52.87"</u>	Longitude: <u>W 83° 29' 31.83"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>BIGGIE @ FIED HOUSE</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> PRCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>18</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☒ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input checked="" type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab? ☐ Yes ☒ No

2. If yes, collected from: ☐ Flow ☐ Pool

3. Intermittent flow trap set? ☐ Yes ☐ No If Yes, type: ☐ OBM ☐ Caulk dam

Section 8: Any Non-Illlicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>SW 507-17</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1000</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>45°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 35' 36.83"</u>	Longitude: <u>W 85° 29' 31.93"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>BIGGIO NEAR FIELDHOUSE - CIRCLE PIPE IN BOX</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	_____ ' _____"	Tape measure	
	Measured length	_____ ' _____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	<input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>pmc</u>		Outfall ID: <u>SW 507-18</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1010</u>	
Investigators: <u>MIKE FREEMAN</u>		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>46°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N 32° 35' 56.54"</u>	Longitude: <u>W 85° 29' 31.68"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>BIGGIO @ (FIELD HOUSE SIDE - / BOX)</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>37 x 25</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>Pmc</u>		Outfall ID: <u>SW 507-19</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1025</u>	
Investigators:		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>46°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 59' 71.37"</u>	Longitude: <u>W85° 49' 60.76"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>Biggio North of Field House</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only
Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:			
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls
Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: PMC		Outfall ID: SW507-20	
Today's date: JAN 15 2025		Time (Military): 1030	
Investigators:		Form completed by: Mike Freeman	
Temperature (°F): 47°	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: N 32° 35' 56.57"	Longitude: W 85° 29' 31.60"	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			
BIBBIO DR → BEARD EAVES LOADING DOCK			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <div style="text-align: center; font-size: 1.2em;">36"</div>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:			
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW T 07-14</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1038</u>	
Investigators:		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>50°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 36' 21.70"</u>	Longitude: <u>W 85° 29' 22.57"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known):			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input checked="" type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>72x96</u> In Water: <input type="checkbox"/> No <input checked="" type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial <u>✓ Energy</u>			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:			
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK IF Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>Pmc</u>		Outfall ID: <u>SW T07-17</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1140</u>	
Investigators:		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>50°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N32° 35' 2.28"</u>	Longitude: <u>W85° 29' 26.47"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial <input type="checkbox"/> Ultra-Urban Residential <input type="checkbox"/> Suburban Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Institutional Other: _____ Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>Wellness Kitchen</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Tape measure	
	Measured length	____' ____"	Tape measure	
	Time of travel		Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
			<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:			
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight: origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☒ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: PMC		Outfall ID: SW U10-10	
Today's date: JAN 15 2025		Time (Military): 1244	
Investigators:		Form completed by: MIKE FIREMAN	
Temperature (°F): 54°	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: N32° 35' 44.50"	Longitude: W85° 29' 16.11"	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): Forestry + Horticulture			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <div style="font-size: 1.5em; text-align: center;">54"</div>
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial - CONSTRUCTION - RESTORATION -			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion	<input type="checkbox"/> Peeling Paint
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Suds <input type="checkbox"/> Floatables <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>AME</u>		Outfall ID: <u>SW W09-04</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1300</u>	
Investigators:		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>55°</u>	Rainfall (in.): Last 24 hours: <u>✓</u> Last 48 hours: <u>✓</u>		
Latitude: <u>N32° 35' 48.81"</u>	Longitude: <u>W85° 29' 04.29"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial <input type="checkbox"/> Ultra-Urban Residential <input type="checkbox"/> Suburban Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Institutional Other: _____ Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>OUTFALL AT MEMORY GARDEN (STEM - AG)</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER		RESULT	UNIT	EQUIPMENT
<input type="checkbox"/> Flow #1	Volume		Liter	Bottle
	Time to fill		Sec	
<input type="checkbox"/> Flow #2	Flow depth		In	Tape measure
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature			°F	Thermometer
pH			pH Units	Test strip/Probe
Ammonia			mg/L	Test strip

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☒ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Sulfide <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Green <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Yellow <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Suds <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Corrosion <input type="checkbox"/> Peeling Paint	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Only <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Suds <input type="checkbox"/> Colors <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PME</u>		Outfall ID: <u>SW W 09-06</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1310</u>	
Investigators:		Form completed by: <u>MIKE FIZEZMAN</u>	
Temperature (°F): <u>55°</u>	Rainfall (in.): Last 24 hours: <input checked="" type="checkbox"/> Last 48 hours: <input checked="" type="checkbox"/>		
Latitude: <u>N 32° 35' 48.04"</u>	Longitude: <u>W 85° 29' 04.03"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial		<input type="checkbox"/> Open Space	
<input type="checkbox"/> Ultra-Urban Residential		<input checked="" type="checkbox"/> Institutional	
<input type="checkbox"/> Suburban Residential		Other: _____	
<input type="checkbox"/> Commercial		Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>RESIDENCE HALL PARKING - PAST BRIDGE</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>24"</u> In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	Ft, In	Tape measure	
	Measured length	Ft, In	Tape measure	
	Time of travel	S	Stop watch	
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include Trash!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight; origin not obvious	<input type="checkbox"/> 2 - Some; indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some; origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Auburn University OUTFALL RECONNAISSANCE INVENTORY/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

Subwatershed: <u>PMC</u>		Outfall ID: <u>SW W 09-11</u>	
Today's date: <u>JAN 15 2025</u>		Time (Military): <u>1325</u>	
Investigators:		Form completed by: <u>MIKE FREEMAN</u>	
Temperature (°F): <u>55°</u>	Rainfall (in.): Last 24 hours: <u>0</u> Last 48 hours: <u>0</u>		
Latitude: <u>N 32° 35' 46.69"</u>	Longitude: <u>W 85° 29' 03.81"</u>	GPS Unit:	GPS LMK #:
Camera:		Photo #s:	
Land Use in Drainage Area (Check all that apply):			
<input type="checkbox"/> Industrial <input type="checkbox"/> Ultra-Urban Residential <input type="checkbox"/> Suburban Residential <input type="checkbox"/> Commercial		<input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Institutional Other: _____ Known Industries: _____	
Notes (e.g., origin of outfall, if known): <u>BETWEEN STEM & AG / RESIDENCE WALL</u>			

Section 2: Outfall Description

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE <input type="checkbox"/> Steel <input type="checkbox"/> Other: _____	<input checked="" type="checkbox"/> Circular <input checked="" type="checkbox"/> Single <input type="checkbox"/> Elliptical <input type="checkbox"/> Double <input type="checkbox"/> Box <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Diameter/Dimensions: <u>12"</u>	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Earthen <input type="checkbox"/> rip-rap <input type="checkbox"/> Other: _____	<input type="checkbox"/> Trapezoid <input type="checkbox"/> Parabolic <input type="checkbox"/> Other: _____	Depth: _____ Top Width: _____ Bottom Width: _____	
<input type="checkbox"/> In-Stream	(applicable when collecting samples)			
Flow Present?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If No, Skip to Section 5</i>			
Flow Description (If present)	<input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Substantial			

Section 3: Quantitative Characterization

FIELD DATA FOR FLOWING OUTFALLS				
PARAMETER	RESULT	UNIT	EQUIPMENT	
<input type="checkbox"/> Flow #1	Volume	Liter	Bottle	
	Time to fill	Sec		
<input type="checkbox"/> Flow #2	Flow depth	In	Tape measure	
	Flow width	____' ____"	Ft, In	Tape measure
	Measured length	____' ____"	Ft, In	Tape measure
	Time of travel		S	Stop watch
Temperature		°F	Thermometer	
pH		pH Units	Test strip/Probe	
Ammonia		mg/L	Test strip	

Outfall Reconnaissance Inventory Field Sheet

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? ☐ Yes ☐ No (If No, Skip to Section 5)

INDICATOR	CHECK if Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables -Does Not Include 'Trash'!!	<input type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input type="checkbox"/> Suds <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight, origin not obvious	<input type="checkbox"/> 2 - Some, indications of origin (e.g., possible suds or oil sheen)	<input type="checkbox"/> 3 - Some, origin clear (e.g., obvious oil sheen, suds, or floating sanitary materials)

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? ☐ Yes ☐ No (If No, Skip to Section 6)

INDICATOR	CHECK if Present	DESCRIPTION	COMMENTS
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion	
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:	
Abnormal Vegetation	<input type="checkbox"/>	<input type="checkbox"/> Excessive <input type="checkbox"/> Inhibited	
Poor pool quality	<input type="checkbox"/>	<input type="checkbox"/> Odors <input type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input type="checkbox"/> Suds <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other:	
Pipe benthic growth	<input type="checkbox"/>	<input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:	

Section 6: Overall Outfall Characterization

☒ Unlikely ☐ Potential (presence of two or more indicators) ☐ Suspect (one or more indicators with a severity of 3) ☐ Obvious

Section 7: Data Collection

1. Sample for the lab?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. If yes, collected from:	<input type="checkbox"/> Flow <input type="checkbox"/> Pool
3. Intermittent flow trap set?	<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, type: <input type="checkbox"/> OBM <input type="checkbox"/> Caulk dam

Section 8: Any Non-Illicit Discharge Concerns (e.g., trash or needed infrastructure repairs)?

Appendix D

Illicit Discharge Detection & Elimination

Investigated IDDE & Details

April 1, 2024, through March 31, 2025

2024-2025 Illicit Discharge Detection & Elimination

Date	Location	Observation	Contaminant	Samples Y/N	Corrective Measures Taken	Date
6/7/2024	North parking lot JHS	sewage smell in SW U04-64	sewage?		upline investigation initiated	6/12/2024
7/3/2024	Swingle Hall	Sewage Overflow from cleanout into storm drain.	sewage	N	Line Unclogged by facilities personnel	7/3/2024
9/6/2024	Facilities Bldg 6 rear	Truck mounted mobile refueler on AU vehicle had a hose to split releasing < 1 gallon diesel to parking surface	diesel	N	oil dry quickly applied to surface	9/6/2024
9/10/2024	Parkerson Mill Creek @ Lem Morrison Bridge and Greenway Bridge	Observed turbid water between Lem Morrison and Greenway Bridge. Appeared to be the tail end of a discharge.	turbid water	N	None/Natural Flushing	9/10/2024
9/20/2024	Green Hall Courtyard	Estimated less than 1 gallon of hydraulic oil spilled onto concrete	hydraulic oil	N	FM to follow protocol to remove oil from sidewalk	9/23/2024
11/1/2024	Graves Amphitheater	Estimated 3-5 gallons of sewage overflow into storm as a result of an occluded line.		N	Line Unclogged by facilities personnel	11/1/2024
11/6/2024	Beard Eaves Outfall	Milky white/grey substance noted in the creek. Appeared to be	Paint?	N	None/Natural Flushing	11/6/2024
11/14/2025	Arboretum @ Headwall coming into the preserve	Turbid water coming down from the STEM/AG construction	Light Sediment	N	Replaced floc logs/filtration bags at dewatering	11/14/2025
12/6/2024	Beard Eaves Outfall	Blue/grey paint like material noted coming from BEMC Culvert.	Unknown	N	Flushed downstream within an hr of notice	12/6/2024
1/31/2025	Red Barn Outfall	Turbid water coming down from the direction of final construct	Flushing of storm	N	None/Natural Flushing	1/31/2025
2/20/2025	Beard Eaves Outfall	Turbid water entering into the creek from the direction of ACLC	Sediment	N	Secondary storm line replaced. Flushed out.	2/20/2025

Appendix E

Construction Site Inventory & Details

April 1, 2024, through March 31, 2025

Appendix F

Post Construction Green Infrastructure BMP Inventory & Inspection

April 1, 2024, through March 31, 2025

ID	Type	Description	Northing	Easting	PM Inspections	MS4 Inspection
BB-01	Bioretention Basin	West Campus Basin 1	758225.419	765956.388	20	1
BB-02	Bioretention Basin	West Campus Basin 2	758376.003	765958.313	20	1
BB-03	Bioretention Basin	West Campus Basin 3	758517.978	765955.846	20	1
BB-04	Bioretention Basin	West Campus Basin 4	758228.842	765747.198	20	1
BB-05	Bioretention Basin	West Campus Basin 5	758381.564	765755.314	20	1
BB-06	Bioretention Basin	West Campus Basin 6	758529.441	765736.857	20	1
BB-07	Bioretention Basin	West Campus Basin 7	758238.465	765327.734	20	1
BB-08	Bioretention Basin	West Campus Basin 8	758535.185	765377.05	20	1
BB-09	Bioretention Basin	West Campus Basin 9	758722.087	765190.263	20	1
BB-10	Bioretention Basin	Pharmacy Research Basin 1	761430.634	761020.487	20	1
BB-11	Bioretention Basin	Pharmacy Research Basin 2	761569.458	761003.542	20	1
BB-12	Bioretention Basin	Nursing Basin 1	761516.602	761229.13	20	1
BB-13	Bioretention Basin	Nursing Basin 2	761729.258	761170.238	20	1
BB-14	Bioretention Basin	Nursing Basin 3	761727.261	761080.608	20	1
BB-15	Bioretention Basin	ASEL Basin 1	756581.31	764471.00	20	1
BB-16	Bioretention Basin	ASEL Basin 2	753348.15	764569.33	20	1
BB-17	Bioretention Basin	ASEL Basin 3	756580.54	764695.46	20	1
BB-18	Bioretention Basin	ASEL Basin 4	757134.44	764537.44	20	1
BRC-01	Bioretention Cell	Foy Hall Bioretention Cell	763407.054	765682.977	20	1
BRC-02	Bioretention Cell	Campus Safety Bioretention Cell	761066.411	766090.049	20	1
BRC-03	Bioretention Cell	CASIC Bioretention Cell	761055.331	758997.308	20	1
BRC-04	Bioretention Cell	Corley Bioretention Cell 1	763663.773	764042.59	20	1
BRC-05	Bioretention Cell	Corley Bioretention Cell 2	763622.125	763959.864	20	1
BRC-06	Bioretention Cell	Mell Bioretention Cell 1	763790.009	765433.314	20	1
BRC-07	Bioretention Cell	Mell Bioretention Cell 2	763789.971	765283.68	20	1
BRC-08	Bioretention Cell	Mell Bioretention Cell 3	763790.137	765086.417	20	1
BRC-09	Bioretention Cell	Horton Hardgrave Bioretention Cell	761835.117	765912.691	20	1
BRC-10	Bioretention Cell	West Campus Bioretention Cell 1	758024.941	765700.549	10	1
BRC-11	Bioretention Cell	West Campus Bioretention Cell 2	758036.911	765234.281	10	1
BRC-12	Bioretention Cell	SportsPlex Bioretention Cell	759862.77	761349.2	20	1
BRM-01	Berm	Arboretum Berm 1	763882.906	762201.25	12	1
BRM-02	Berm	Arboretum Berm 2	764243.147	762607.741	12	1
BRM-03	Berm	Arboretum Berm 3	764042.345	762607.442	12	1
BRM-04	Outlet Berm	Woodfield Drive Berm 1	761589.811	759935.15	12	1
BRM-05	Outlet Berm	Woodfield Drive Berm 2	761156.332	759871.907	12	1
BRM-06	Outlet Berm	Woodfield Drive Berm 3	760609.706	760131.388	12	1
CI-01	Cistern	Dudley Hall Cistern	763242.478	763743.599	26	1
CI-02	Cistern	Arboretum Cistern 1	763825.449	762159.585	26	1
CI-03	Cistern	Arboretum Cistern 2	764116.722	762653.166	26	1
CI-04	Cistern	ACLC Cistern 1	762843.743	764167.2	0	1
CI-05	Cistern	Football Performance Cistern 1	760356.366	763460.366	0	1
DDET-01	Dry Detention Basin	VCOM Pond	760575.328	760287.361	26	1
DDET-02	Dry Detention Basin	West Campus Pond	759043.656	764976.252	20	1
DDET-03	Dry Detention Basin	Medical Clinic Pond	762266.136	761383.546	20	1
DDET-04	Dry Detention Basin	Facilities Pond	758241.439	763286.672	50	1
DDET-05	Dry Detention Basin	District Energy Pond	759762.452	765460.951	20	1
DDET-06	Dry Detention Basin	Theta Chi Pond	758965.981	762250.575	0	1
DDET-07	Dry Detention Basin	Delta Tau Delta Pond	759107.307	762263.753	0	1

DDET-08	Dry Detention Basin	Health Sciences Sector Pond	761256.191	760834.644	10	1
DDET-09	Dry Detention Basin	Risk Management Pond	758014.508	762998.407	20	1
DDET-10	Dry Detention Basin	SportsPlex Pond	759600.49	760600.15		1
DDET-11	Dry Detention Basin	ARTF Building 5 Pond	761046.13	759557.86	20	1
DDET-12	Dry Detention Basin	ARTF Building 6 Pond	758363.7	758244.42	20	1
DDET-13	Dry Detention Basin	Tennis Courts Pond	759588.344	765408.291	20	1
DDET-14	Dry Detention Basin	Chilled Water Plant	760640.976	761560.459	20	1
DDET-15	Dry Detention Basin	Transformation Garden	763215.938	760945.045	0	1
GS-01	Grassed Swale	Ag Heritage Park Swale	761629.387	762567.204	20	1
GS-02	Grassed Swale	Medical Clinic Swale	762390.435	761711.035	24	1
GS-03	Grassed Swale	VCOM Swale 1	760757.545	760229.729	26	1
GS-04	Grassed Swale	VCOM Swale 2	760827.756	760138.269	26	1
GS-05	Grassed Swale	VCOM Swale 3	761002.268	760082.434	26	1
GS-06	Grassed Swale	ARTF MRI Swale 1	760412.176	758902.844	20	1
GS-07	Grassed Swale	Lem Morrison Swale	762148.543	761268.924	20	1
GS-08	Grassed Swale	Arboretum Swale	764187.037	762438.012		1
GS-09	Grassed Swale	CASIC Swale	760781.495	758817.433	20	1
GS-10	Grassed Swale	Research Park Swale	760420.934	758571.334	20	1
GR-01	Green Roof	Rec and Wellness Green Roof 1	761331.297	764472.702		1
GR-02	Green Roof	Rec and Wellness Green Roof 2	760861.839	764507.581		1
GR-03	Green Roof	Nursing Green Roof	761066.4107	766090.0492	15	1
GR-04	Green Roof	Brown Kopel Green Roof	763237.807	766187.963	26	1
GR-05	Green Roof	Rane Culinary Science Center	764579.078	765517.924		1
PA-01	Porous Asphalt	VCOM Pond Path Paving	760551.855	760217.067	20	1
PP-01	Permeable Pavers	Samford Park Pavers	764362.438	766341.376	50	1
PP-02	Permeable Pavers	Foy Hall Pavers	763596.195	765666.497	20	1
PP-03	Permeable Pavers	CASIC Pavers	760878.493	758911.607	20	1
PP-04	Permeable Pavers	Garden of Memory Pavers	763724.679	763100.491	20	1
PP-05	Permeable Pavers	Upper Quad Pavers	763490.318	765221.041	26	1
PP-06	Permeable Pavers	Mell Concourse Pavers	763790.097	765180.741	26	1
PP-07	Permeable Pavers	Harbert Recruiting Pavers	761812.016	764587.966	26	1
PP-08	Permeable Pavers	South College Street Parking Deck	764485.587	764822.946	26	1
PP-09	Permeable Pavers	Rane Culinary Science Center	764484.152	765530.983		1
PP-10	Permeable Pavers	Heisman Dr. Transit Hub	762579.466	764622.833		1
PC-01	Pervious Concrete	Arboretum Sidewalk 1	764345.564	762557.87	26	1
PC-02	Pervious Concrete	Arboretum Sidewalk 2	760293.139	765729.32	26	1
PC-03	Pervious Concrete	Arboretum Sidewalk 3	764101.068	762450.098	26	1
PC-04	Pervious Concrete	Arboretum Sidewalk 4	764139.101	762311.241	26	1
PC-05	Pervious Concrete	Arboretum Sidewalk 5	763884.964	762418.462	26	1
PC-06	Pervious Concrete	Arboretum Sidewalk 6	764157.322	762296.021	26	1
RB-01	Rain Barrel	Arboretum Rain Barrel	763863.384	762143.701	26	1
RB-02	Rain Barrel	Dudley Rain Barrel	763242.478	763743.6	12	1
RG-01	Rain Garden	Gorrie Rain Garden 1	763564.53	763583.842	20	1
RG-02	Rain Garden	Gorrie Rain Garden 2	763512.559	763748.121	20	1
RG-03	Rain Garden	Plant Sciences Rain Garden 1	762252.404	759917.278	20	1
RG-04	Rain Garden	Plant Sciences Rain Garden 2	762211.743	759918.238	18	1
RG-05	Rain Garden	Dudley Rain Garden	763242.478	763743.599	12	1
RG-06	Rain Garden	Turfgrass Rain Garden	758786.644	756180.294		1
RG-07	Rain Garden	Arboretum Rain Garden	764321.374	762515.223	26	1
RG-08	Rain Garden	Arboretum Rain Garden	764142.166	762315.617	26	1

RG-09	Rain Garden	Arboretum Rain Garden	763760.969	762192.845	26	1
RG-10	Rain Garden	Arboretum Rain Garden	763969.332	762611.932	26	1
RG-11	Rain Garden	Arboretum Rain Garden	763780.984	762194.366	26	1
RG-12	Rain Garden	Arboretum Rain Garden	763801.71	762166.783	26	1
RG-13	Rain Garden	Arboretum Rain Garden	763850.045	762078.895	26	1
RG-14	Rain Garden	Chilled Water Plant Rain Garden 1	760833.952	761472.669	0	1
RG-15	Rain Garden	Chilled Water Plant Rain Garden 2	760897.747	761587.586	0	1
RG-16	Rain Garden	Football Performance Rain Garden 1	760350.041	763406.659	0	1
RG-17	Rain Garden	Football Performance Rain Garden 2	760593.999	763741.15	0	1
RG-18	Rain Garden	College of Education Building	762954.333	763141.572	0	1
SB-01	Sediment Basin	Petrie Subsurface Sediment Basin	762337.303	765368.054	0	1
UD-01	Underground Detention	Lowder Underground Detention	762322.269	766015.625	0	1
UD-02	Underground Detention	Shelby Underground Detention	763024.758	766285.682	0	1
UD-03	Underground Detention	Indoor Practice Underground Detention	760649.251	763280.439	0	1
UD-04	Underground Detention	President's Underground Detention	764157.322	762296.021	0	1
UD-05	Underground Detention	Football Performance Underground Detention 1	760192.882	763454.693	0	1
UD-06	Underground Detention	Football Performance Underground Detention 2	760541.629	763717.873	0	1
UD-07	Underground Detention	ACLC Underground Detention	762618.134	764019.738	20	1
WDET-01	Wet Detention Basin	Gogue Performing Arts Center Pond	763013.75	759497.73	20	1
WDET-02	Wet Detention Basin	Campus Recreation SportsPlex	759778.94	760914.97		

Appendix G

Municipal Facility SOP, Inventory & Inspection Records

April 1, 2024 through March 31, 2025

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Hutsell Rosen Track			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 11JUL24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Jane B Moore Softball Complex			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 11JUL24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Jordan-Hare Stadium			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 14NOV24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

Issues from March inspection had been addressed.

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Nevell Arena			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 12NOV24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Soccer Complex			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 11JUN24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Watson Field House			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 18JUN24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Football Complex			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 18JUN24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Plainsman Park			
Facility POC: Eric Kleypass		Phone Number: 3347401267	
Date of Inspection: 11JUN24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: AU Hotel Conference Center			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 09SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Campus Dining Facility			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 09SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Foy Dining			
Facility POC:		Phone Number: 334-740-1267	
Date of Inspection: 09SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Hey Day-Rayne Dining			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 09SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Terrell Dining Hall			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 09SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: The Edge			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 13SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Village Dining			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 13SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Wellness Kitchen			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 13SEP24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Campus Recreation Facility			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Intramural Field House			
Facility POC:		Phone Number:	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Sportsplex			
Facility POC:		Phone Number:	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Hot Water Plant II (Vet School)			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 16AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Landscape Services			
Facility POC: Ray Willett		Phone Number: 3347401267	
Date of Inspection: 16AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Materials Management			
Facility POC: Martin Arwood		Phone Number: 3347401267	
Date of Inspection: 23AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

HSI Provides Online Training for Stormwater and SPCC through Facilities Training.

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Satellite Steam Plant			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 23AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

Training provided online by HSI.

***Compliant (C)

Noncompliant (NC)

Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Laydown Yard (Back 40)			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 23AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

Minor Litter Policing of the laydown yard needed in areas near the large Pole Barn.

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: 44 KV Generator			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: 115 KV Generator			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Auto/Small Engine Shop			
Facility POC: Mark Carroll		Phone Number:	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

Stormwater and SPCC Training provided Online by HSI

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Chilled Water Plant I			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Chilled Water Plant II			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 08AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Chilled Water Plant III (Vet School)			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 16AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: District Energy Plant			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 16AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

SPCC and Stormwater Training provide through HSI online.

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Fleet Refueling Station			
Facility POC: Mark Carroll		Phone Number: 3347401267	
Date of Inspection: 16AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

Stormwater Training Provided online by HIS.

***Compliant (C)

Noncompliant (NC)

Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Hot Water Plant I			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 16AUG24		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

Training provide by HSI (online)

***Compliant (C)

Noncompliant (NC)

Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Fraternity Houses (ALL See Notes)			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 20FEB25		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

A lot of work done over the last year to improve litter issues around Greek Life. Much improved but more work ongoing. A large clean up is scheduled for 1MAR24

MSF

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Environmental Health and Safety I			
Facility POC: Tom Hodges		Phone Number: 334-703-7511	
Date of Inspection: 20FEB25		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

Personnel in process of facility maintenance.

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Environmental Health and Safety II			
Facility POC: Tom Hodges		Phone Number: 334-703-7511	
Date of Inspection: 20FEB25		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Environmental Health and Safety III			
Facility POC: Tom Hodges		Phone Number: 334-703-7511	
Date of Inspection: 20FEB25		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Pathological Waste Incinerator			
Facility POC: Steven Nolen		Phone Number: 334-703-3859	
Date of Inspection: 20FEB25		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Auburn University Municipal Facility Inspection Form

Facility Information			
Facility Name: Student Center			
Facility POC:		Phone Number: 3347401267	
Date of Inspection: 20FEB25		Inspectors: Mike Freeman	
Site Evaluation	Yes	No	
Does facility have potential pollutants or processes exposed to rain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Inspection Checklist			
Good Housekeeping			
Inspection Item	C	NC	
1. Site is free from litter and debris?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Are designated waste receptacles properly used?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Are spills immediately cleaned up to the extent that only stains remain?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Are BMPs in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Storm drainage system and outfalls are inspected and free of debris and spills?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Pollution Prevention	C	NC	N/A
6. Is exposed equipment/processes clean and in good working order?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If the facility stores materials or products outdoors (except final products intended for outdoor use), is there is appropriate coverage to prevent discharging?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. If facility has outdoor storage, storage container is in good condition (i.e. not open, deteriorating, or leaking)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. If facility has outdoor storage, spill kits/equipment are onsite and personnel are aware of spill procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Does facility have materials or residuals on the ground, in the storm drain system, and/or local water ways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Does the facility have any apparent IDDEs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Are hazardous materials/waste stored on or within containment and distanced from storm drain system and/or local waterways?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Are hazardous materials/waste storage areas properly labeled?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Environmental Training			
14. Has the Facility POC received Stormwater training?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Auburn University Municipal Facility Inspection Form

Comments (attach any necessary photos):

***Compliant (C) Noncompliant (NC) Non-applicable (N/A)

Appendix H

Water Monitoring Data

April 1, 2024, through March 31, 2025

Parkerson Mill Creek Water Quality Monitoring April 1, 2024 through March 31, 2025										
AWW Site Code		7021002 (T07-14)	AWW Site Code		7016027	AWW Site Code		7021007		
Location Description		Wellness Kitchen	Location Description		PMC @ Longleaf Dr.	Location Description		AG Heritage Pond Influent		
Sample Date		Result (cfu/100mL)		Sample Date		Result (cfu/100mL)		Sample Date	Result (cfu/100mL)	
16-Apr-24		967		16-Apr-24		0		16-Apr-24		1733
8-May-24		267		8-May-24		333		8-May-24		333
11-Jun-24		500		11-Jun-24		67		11-Jun-24		67
8-Jul-24		367		8-Jul-24		133		8-Jul-24		167
7-Aug-24		667		7-Aug-24		200		7-Aug-24		100
18-Sep-24		200		18-Sep-24		67		18-Sep-24		433
8-Oct-24		233		8-Oct-24		533		8-Oct-24		1500
18-Nov-24		1267		18-Nov-24		67		18-Nov-24		1500
18-Dec-24		233		18-Dec-24		100		18-Dec-24		1000
16-Jan-25		200		16-Jan-25		33		16-Jan-25		867
10-Feb-25		33		10-Feb-25		0		10-Feb-25		9733
11-Mar-25		800		11-Mar-25		100		11-Mar-25		100
AWW Site Code		7011036 (S07-13)	AWW Site Code		7016013	AWW Site Code		7005011		
Location Description		Biggio Drive near Coliseum	Location Description		Arboretum (Town Creek)	Location Description		Raptor Center		
Sample Date		Result (cfu/100mL)		Sample Date		Result (cfu/100mL)		Sample Date		Result (cfu/100mL)
16-Apr-24		200		16-Apr-24		33		16-Apr-24		33
8-May-24		1167		8-May-24		500		8-May-24		133
11-Jun-24		867		11-Jun-24		733		11-Jun-24		667
8-Jul-24		6700		8-Jul-24		100		8-Jul-24		40000
7-Aug-24		1633		7-Aug-24		133		7-Aug-24		1000
18-Sep-24		100		18-Sep-24		267		18-Sep-24		333
8-Oct-24		200		8-Oct-24		367		8-Oct-24		167
18-Nov-24		1267		18-Nov-24		4233		18-Nov-24		533
18-Dec-24		100		18-Dec-24		133		18-Dec-24		700
16-Jan-25		0		16-Jan-25		100		16-Jan-25		267
10-Feb-25		33		10-Feb-25		100		10-Feb-25		233
11-Mar-25		7267		11-Mar-25		133		11-Mar-25		933
AWW Site Code		7014007 (P4-30)	AWW Site Code		7014006	AWW Site Code		07005012 (P4-37)		
Location Description		Farm House	Location Description		Hemlock	Location Description		Thach Ave InFlow		
Sample Date		Result (cfu/100mL)		Sample Date		Result (cfu/100mL)		Sample Date		Result (cfu/100mL)
16-Apr-24		877		16-Apr-24		133		16-Apr-24		33
8-May-24		800		8-May-24		2200		8-May-24		567
11-Jun-24		200		11-Jun-24		133		11-Jun-24		100
8-Jul-24		200		8-Jul-24		100		8-Jul-24		10867
7-Aug-24		200		7-Aug-24		733		7-Aug-24		300
18-Sep-24		1600		18-Sep-24		700		18-Sep-24		1700
8-Oct-24		33		8-Oct-24		133		8-Oct-24		2667
18-Nov-24		567		18-Nov-24		200		18-Nov-24		2100
18-Dec-24		67		18-Dec-24		100		18-Dec-24		1933
16-Jan-25		33		16-Jan-25		233		16-Jan-25		900

10-Feb-25	167		10-Feb-25	500		10-Feb-25	1300
11-Mar-25	100		11-Mar-25	1033		11-Mar-25	1200
AWW Site Code 07014005 (N04-09)			AWW Site Code 7005004			AWW Site Code 07014002 (P4-32)	
Location Description Tennis Courts			Location Description VCOM Pond			Location Description DEP	
Sample Date	Result (cfu/100mL)		Sample Date	Result (cfu/100mL)		Sample Date	Result (cfu/100mL)
16-Apr-24	533		16-Apr-24	33		16-Apr-24	33
8-May-24	367		8-May-24	333		8-May-24	9167
11-Jun-24	967		11-Jun-24	33		11-Jun-24	967
8-Jul-24	67		8-Jul-24	233		8-Jul-24	6567
7-Aug-24	300		7-Aug-24	533		7-Aug-24	1800
18-Sep-24	267		18-Sep-24	1567		18-Sep-24	500
8-Oct-24	133		8-Oct-24	100		8-Oct-24	5600
18-Nov-24	867		18-Nov-24	0		18-Nov-24	333
18-Dec-24	567		18-Dec-24	167		18-Dec-24	100
16-Jan-25	1933		16-Jan-25	0		16-Jan-25	0
10-Feb-25	233		10-Feb-25	300		10-Feb-25	2300
11-Mar-25	967		11-Mar-25	0		11-Mar-25	4467
AWW Site Code 7018002							
Location Description Shug Jordan Pkwy							
Sample Date	Result (cfu/100mL)						
16-Apr-24	267						
8-May-24	167						
11-Jun-24	200						
8-Jul-24	500						
7-Aug-24	133						
18-Sep-24	100						
8-Oct-24	67						
18-Nov-24	100						
18-Dec-24	333						
16-Jan-25	233						
10-Feb-25	100						
11-Mar-25	267						