Discharge Report
For Projects Permitted Under Individual Construction Discharge Permit

In accordance with the Individual Construction Discharge Permit this form shall be completed by the On-Site Plan Coordinator or a person acting under the direction of the On-Site Plan Coordinator after observation of any visibly discolored stormwater leaving the construction site. Attach additional pages as necessary to completely document the discharge. Submit a copy to DEC if turbidity readings above 25 NTU are noted. Retain a copy on site for all recorded discharges.

**A. Project Information**
1. Project Name: ____________________  2. Notice of Intent Number: ________________

**B. Discharge Information**
1. Date of Discharge: ____________________  2. Time Discharge Detected: ________________
3. Describe Location(s) of the Discharge(s):

4. Duration of the Discharge(s): ____________________
5. Cause of the Discharges(s):

6. Was the discharge visibly turbid?  Yes  No
If ‘No’, only complete section E below. If Yes, proceed to item 7.

7. Did the On-Site Plan Coordinator shall immediately inspect and maintain BMPs for compliance with the approved EPSC Plan?  Yes  No

8. Describe any deficiencies in compliance with the EPSC that contributed to the discharge:

9. Fully describe BMP maintenance (e.g. locations, BMP deficiencies, actions taken) performed to address the discharge:

10. After inspection and maintenance, did visibly discolored stormwater continue to leave the construction site?  Yes  No
If ‘No’, only complete section E below. If Yes, proceed to item 11.

11. Did the visibly discolored stormwater leaving the construction site reach Waters of the State (including wetlands)?  Yes  No
If ‘No’, supplement BMPs as necessary to correct the discharge and shall continue to inspect, maintain and supplement BMPs until such time as the discharge is corrected. Complete section E below. If Yes, proceed to item 12.

12. Did the On-Site Plan Coordinator shall immediately evaluate the need for supplemental BMPs and install such BMPs as necessary to correct or eliminate the discharge?  Yes  No
13. Fully describe the supplemental BMPs installed to correct or eliminate the discharge.

14. After installing supplemental BMPs, did discharge of visibly discolored stormwater from the construction activities continue to enter Waters of the State?  □ Yes  □ No  
   if ‘No’, only complete section E below. If Yes, proceed to item 15.

C. Project Status
1. Describe the work occurring that contributed to the discharge(s):

2. At the time of the discharge, was the EPSC Plan fully implemented for the work contributing to the discharge?  □ Yes  □ No
3. If No, describe what EPSC practices were not fully implemented and why:

D. Corrective Action
1. Describe the corrective action taken, including a description of the actions taken, their location, and the time and date of the corrective action.

E. On-Site Plan Coordinator Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: ___________________________ Date: ___________________________

Submit Original Form to:

Vermont Department of Environmental Conservation
Watershed Management Division, Stormwater Program
1 National Life Drive, Davis 3
Montpelier, VT 05620-3522