

Discharge Report
For **Low Risk** Projects
Under General Permit 3-9020



If there is a discharge of visibly discolored stormwater from the construction site or from the construction site to waters of the State, the permittee shall take immediate corrective action. If, after completing the corrective action, there continues to be a discharge of sediment from the construction site to waters of the state, the permittee shall notify DEC by submitting a report within 72 hours of the discharge. Attach additional pages as necessary to completely document the discharge.

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) : _____

C. Project Status

1. Describe the work occurring that contributed to the discharge(s): _____

2. At the time of the discharge, was the Low Risk Site Handbook for Erosion Prevention and Sediment Control 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 take, including a description of the actions taken, their location, and the time and date of the corrective action. _____

E. Certification Statement

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.

Name: _____ Owner Principal Operator

Signature: _____ Date: _____

Submit Original Form to:

Vermont Department of Environmental Conservation
Watershed Management Division, Stormwater Program
1 National Life Drive, Main 2
Montpelier, VT 05620-3522