STATE OF COLORADO

John W. Hickenlooper, Governor
Christopher E. Urbina, MD, MPH
Executive Director and Chief Medical Officer

Dedicated to protecting and improving the health and environment of the people of Colorado

4300 Cherry Creek Dr. S.
Denver, Colorado 80246-1530
Phone (303) 692-2000
Located in Glendale, Colorado

Laboratory Services Division
8100 Lowry Blvd.
Denver, Colorado 80230-6928
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Colorado Department of Public Health and Environment

ANNUAL REPORT FORM
PERMIT COR900000
STORMWATER DISCHARGES ASSOCIATED WITH NON-EXTRACTIVE INDUSTRIAL ACTIVITY

Please print or type all information. All items must be filled out completely and correctly. If the form is not complete, it will be returned. The permittee must submit an annual report to the Division for the reporting period January 1 through December 31. Annual reports must be received by the Division **by March 31** of the following year. A **signed** original copy of each annual report shall be submitted to the Division to the address listed below, and a copy must be maintained with the SWMP.

MAIL ORIGINAL FORM WITH INK SIGNATURES TO THE FOLLOWING ADDRESS:

Attn: Annual Report
Colorado Department of Public Health and Environment
Water Quality Control Division
4300 Cherry Creek Dr. South WQCD-P-B2
Denver, Colorado 80246-1530

FAXED or EMAILED FORMS WILL NOT BE ACCEPTED.

- **PART A. PERMIT IDENTIFICATION**

  PERMIT NUMBER: COR900000 Facility # COR90 [ ][ ][ ][ ]

  REPORTING PERIOD: Jan 1 – Dec. 31, 20 [ ] *(Form is due by March 31 of the following year)*

- **PART B. PERMITTEE INFORMATION**

  Permittee (Company Name):_____

  Mailing Address: _____

  City: _____ State: _____ Zip code: _____

  Legal Contact Name: _____ Phone Number: _____

  Title: _____ Email: _____

- **PART C. FACILITY INFORMATION**

  Facility Name: _____

  Facility Address: _____

  City: _____ County: _____

  Local Contact Name: _____ Phone Number: _____

  Title: _____ Email: _____

- **PART D. SUMMARY OF INSPECTION DATES**

  In the boxes below provide a **summary** of each comprehensive stormwater facility inspection conducted at the facility. The general permit requires quarterly visual inspections, and one of these inspections must be conducted during a run-off event (See page 20 of the permit). Inactive and unstaffed sites that meet the condition of no exposure are ONLY required to conduct two site inspections annually, in the spring and fall. Please indicate if the facility meets the above condition and is only conducting two inspections per year. Take into account any specific requirements under the Sector Specific Requirements for Industrial Activity, Part III of the general permit. It is not necessary to summarize day-to-day inspections, unless significant problems were noted. **Do not include copies of individual inspection reports.**) USE ADDITIONAL PAGES AS NEEDED

  - **First Quarter Inspection - Date __/__/__. Include the locations inspected, findings, and action taken.**

  - **Second Quarter Inspection - Date __/__/__. Include the locations inspected, findings, and action taken.**

- **Third Quarter Inspection - Date __/__/__. Include the locations inspected, findings, and action taken.**

- **Fourth Quarter Inspection - Date __/__/__. Include the locations inspected, findings, and action taken.**

- **PART E. CORRECTIVE ACTION DOCUMENTATION**
  The permittee must document discovery of any condition listen in Parts I.J.1 and I.J.2, submit the documentation here, and retain a copy onsite with the facility SWMP. (See page 31 of the permit.)
  USE ADDITIONAL PAGES AS NEEDED

(Corrective Actions Continued if needed)

- **PART F. 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 gather and evaluate 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 of Permittee (legally responsible person) Date Signed

Name (printed) Title