SITE INSPECTION REPORT

DATE: ___10/5/23___



General Information							
Name of Project	2804 Bos	swell Avenue	CGP Tracking No.		Inspection Date	10/5/23	
Inspector Name, Title Contact Information	e &	Arthur Genuario					
Present Phase of Cor	struction	construction					
Inspection Location On site – 2804 Boswell Avenue							
Inspection Frequency: Standard Frequency: X Every four (4) business days Every 5 days and within 24 hours of a 0.25" rain Per the Virginia General Permit No.: VAR10 (effective July 1, 2014 and expiring June 30, 2019), inspections shall be conducted at a frequency of (i) at least once every four business days or (ii) at least once every five business days and no later than 48 hours following a measurable storm event. In the event that a measurable storm event occurs when there are more than 48 hours between business days, the inspection shall be conducted on the next business day							
If yes, how did yo □ Rain gauge c	ou determi on site	y a 0.25" storm event?	tive of site. Specify w	eather station source:			
Total rainfall amount that triggered the inspection (in inches): Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? Session of "yes", complete the following: - Describe the conditions that prevented you from conducting the inspection in this location: - Location(s) where conditions were found:							

	Condition and Effectiveness of Erosion and Sediment (E&S) Controls					
Type/Location of E&S Control [Add an additional sheet if necessary]	Repairs or Other Maintenance Needed?*	Corrective Action Required?	Date on Which Maintenance or Corrective Action First Identified?	Notes		
1. CE / Silt fence	□Yes 🗓 N	O Yes X No				
2.	Yes NC	□Yes □ No				
3.	□Yes □NC	□Yes □ No				
4.	□Yes □ NO	Yes No				
5.	Yes NO	Yes No				
6.	□Yes □ NO	Yes No				
7.	□Yes □ NO	Yes No				
8.	Yes NO	Yes No				
9.	Yes NO	Yes No				
10.	□Yes □ NO	Yes No				

	Contractor or Subcontractor Certificati	ion and Signature			
to assure that qualified personnel properly gathered a	nd evaluated the information submitted. Based ion, the information submitted is, to the best o	t and all attachments were prepared in accordance with a system designed on my inquiry of the person or persons who manage the system, or those of my knowledge and belief, true, accurate, and complete. I am aware that a	se		
Signature of Contractor or Subcontractor:10/5/23	Arthur Genuario	Date:			
Printed Name and Affiliation:	Wakefield Homes				
	Certification and Signature by Perent (Control of the Control of t				
'I certify under penalty of law that I have read and understand this document and that this document and all attachments were prepared 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 of Permittee or "Duly Authorized Representative":	Arthur Genuario	Date: 10/5/23			
Printed Name and Affiliation:Wakefile	ed Homes				

SITE INSPECTION REPORT

DATE: ___10/10/23___

General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/10/23	
Inspector Name, Title Contact Information	e &	Arthur Genuario					
Present Phase of Con	struction	construction					
Inspection Location On site – 2804 Boswell Avenue							
Inspection Frequency: Standard Frequency: **Description Frequency: *							
If yes, how did yo □ Rain gauge o	ou determi on site	y a 0.25" storm event?	itive of site. Specify w	eather station source:			
Total rainfall amount that triggered the inspection (in inches): Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? "yes", complete the following: - Describe the conditions that prevented you from conducting the inspection in this location: - Location(s) where conditions were found:							

	Condition and Effectiveness of Erosion and Sediment (E&S) Controls						
Type/Location of E&S Control [Add an additional sheet if necessary]	Repairs or Other Maintenance Needed?*	Corrective Action Required?	Date on Which Maintenance or Corrective Action First Identified?	Notes			
1. CE and SSF	Yes X N	O Yes X No		operational			
2.	Yes NC	□Yes □ No					
3.	□Yes □NC	□Yes □ No					
4.	□Yes □ NO	Yes No					
5.	Yes NO	Yes No					
6.	□Yes □ NO	Yes No					
7.	□Yes □ NO	Yes No					
8.	Yes NO	Yes No					
9.	□Yes □ NO	Yes No					
10.	□Yes □ NO	Yes No					

Contractor or Subcontractor Certification and Signature					
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Signature of Contractor or Subcontractor:10/10/23	Arthur Genuario	Date:			
Printed Name and Affiliation:	Wakefield Homes				
	Certification and Signature by Perr reverse for instructions)	mittee (see			
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Signature of Permittee or "Duly Authorized Representative":	Arthur Genuario	Date: 10/10/23			
Printed Name and Affiliation:Wakefile	ed Homes				

SITE INSPECTION REPORT

DATE: __10/17/23____

General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/17/23	
Inspector Name, Title Contact Information	e &	Arthur Genuario					
Present Phase of Con	struction	construction					
Inspection Location On site – 2804 Boswell Avenue							
Inspection Frequency: Standard Frequency: *** Every four (4) business days Every 5 days and within 24 hours of a 0.25" rain Per the Virginia General Permit No.: VAR10 (effective July 1, 2014 and expiring June 30, 2019), inspections shall be conducted at a frequency of (i) at least once every four business days or (ii) at least once every five business days and no later than 48 hours following a measurable storm event. In the event that a measurable storm event occurs when there are more than 48 hours between business days, the inspection shall be conducted on the next business day							
If yes, how did yo □ Rain gauge o	ou determi on site	y a 0.25" storm event?	tive of site. Specify w	eather station source:			
Total rainfall amount that triggered the inspection (in inches): Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? See Substitute of the following: - Describe the conditions that prevented you from conducting the inspection in this location: - Location(s) where conditions were found:							

	Condition and Effectiveness of Erosion and Sediment (E&S) Controls						
Type/Location of E&S Control [Add an additional sheet if necessary]	Repairs or Other Maintenan Needed?*	nce	Corrective Action Required?	Date on Which Maintenance or Corrective Action First Identified?	Notes		
1. CE and SSF	Yes [X NO	□Yes X No		Everything working		
2.	Yes [ПО	□Yes □ No				
3.	□Yes □	□ио	□Yes □ No				
4.	□Yes □	□ NO	□Yes □ No				
5.	□Yes □	□ NO	□Yes □ No				
6.	□Yes □	□ NO	□Yes □ No				
7.	□Yes □	NO	□Yes □ No				
8.	□Yes □	□ NO	□Yes □ No				
9.	□Yes □	□ NO	□Yes □ No				
10.	□Yes □	NO	□Yes □ No				

	Contractor or Subcontractor Certification	and Signature
to assure that qualified personnel properly gathered and	evaluated the information submitted. Based on n, the information submitted is, to the best of m	d all attachments were prepared in accordance with a system designed my inquiry of the person or persons who manage the system, or those y knowledge and belief, true, accurate, and complete. I am aware that onment for knowing violations."
Signature of Contractor or Subcontractor:10/17/23	Arthur Genuario	Date:
Printed Name and Affiliation:	Wakefield Homes	
	Certification and Signature by Perm reverse for instructions)	ittee (see
to assure that qualified personnel properly gathered and	evaluated the information submitted. Based on n, the information submitted is, to the best of m	d all attachments were prepared in accordance with a system designed my inquiry of the person or persons who manage the system, or those y knowledge and belief, true, accurate, and complete. I am aware that onment for knowing violations."
Signature of Permittee or "Duly Authorized Representative":Art	thur Genuario	Date: 10/17/23
Printed Name and Affiliation:Wakefiled	Homes	

SITE INSPECTION REPORT

DATE: __10/20/23____

General Information							
Name of Project	2804 Bos	swell Avenue	CGP Tracking No.		Inspection Date	10/20/23	
Inspector Name, Title Contact Information	€ &	Arthur Genuario					
Present Phase of Con	struction	construction					
Inspection Location On site – 2804 Boswell Avenue							
Inspection Frequency: Standard Frequency: x Every four (4) business days Every 5 days and within 24 hours of a 0.25" rain Per the Virginia General Permit No.: VAR10 (effective July 1, 2014 and expiring June 30, 2019), inspections shall be conducted at a frequency of (i) at least once every four business days or (ii) at least once every five business days and no later than 48 hours following a measurable storm event. In the event that a measurable storm event occurs when there are more than 48 hours between business days, the inspection shall be conducted on the next business day							
If yes, how did yo ☐ Rain gauge o	ou determi n site	y a 0.25" storm event? Yes ined whether a 0.25" storm even Weather station representating gered the inspection (in inches	tive of site. Specify w	eather station source:			
Total rainfall amount that triggered the inspection (in inches): Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? Yes "yes", complete the following: - Describe the conditions that prevented you from conducting the inspection in this location: - Location(s) where conditions were found:							

	Condition and Effectiveness of Erosion and Sediment (E&S) Controls						
Type/Location of E&S Control [Add an additional sheet if necessary]	Repairs or Other Maintenance Needed?*	Corrective Action Required?	Date on Which Maintenance or Corrective Action First Identified?	Notes			
1. CE and SSF	□Yes □x NO	Yes X No		All working correctly			
2.	Yes NO	□Yes □ No					
3.	Yes NO	□Yes □ No					
4.	Yes NO	□Yes □ No					
5.	Yes NO	□Yes □ No					
6.	Yes NO	□Yes □ No					
7.	Yes NO	□Yes □ No					
8.	Yes NO	□Yes □ No					
9.	Yes NO	□Yes □ No					
10.	Yes NO	□Yes □ No					

	Contractor or Subcontractor Certification	n and Signature	
to assure that qualified personnel properly gathered a	nd evaluated the information submitted. Based o ion, the information submitted is, to the best of i	and all attachments were prepared in accordance with a system design on my inquiry of the person or persons who manage the system, or the my knowledge and belief, true, accurate, and complete. I am aware the risonment for knowing violations."	ose
Signature of Contractor or Subcontractor:10/20/23	Arthur Genuario	Date:	
Printed Name and Affiliation:	Wakefield Homes		
	Certification and Signature by Peri reverse for instructions)	mittee (see	
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Signature of Permittee or "Duly Authorized Representative":	Arthur Genuario	Date: 10/20/23	
Printed Name and Affiliation:Wakefile	ed Homes		

SITE INSPECTION REPORT

DATE: ____10/24/23__

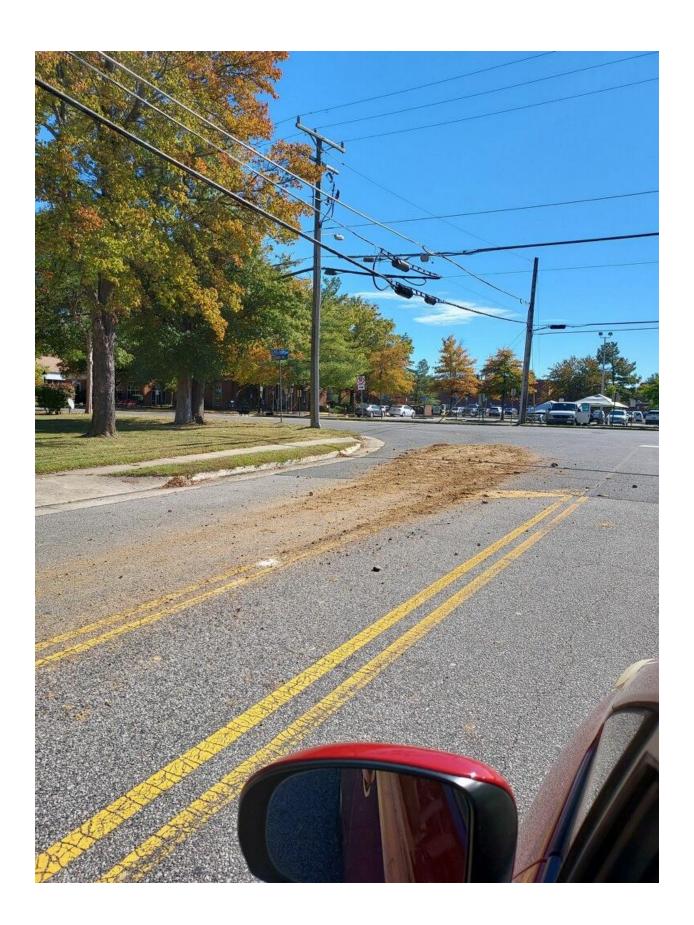
General Information							
Name of Project	2804 Bos	swell Avenue	CGP Tracking No.		Inspection Date	10/24/23	
Inspector Name, Title & Contact Information Arthur Genuario							
Present Phase of Cor	struction	construction					
Inspection Location On site – 2804 Boswell Avenue							
Inspection Frequency: Standard Frequency: **Description Frequency: *							
If yes, how did yo □ Rain gauge c	Was this inspection triggered by a 0.25" storm event? \(\textstyle \text{Yes} \) \(\textstyle \text{NO} \) If yes, how did you determined whether a 0.25" storm event has occurred? Rain gauge on site \(\textstyle \text{Weather station representative of site. Specify weather station source:} \) Total rainfall amount that triggered the inspection (in inches):						
Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? "yes", complete the following: - Describe the conditions that prevented you from conducting the inspection in this location: - Location(s) where conditions were found:							

Condition and Effectiveness of Erosion and Sediment (E&S) Controls						
Type/Location of E&S Control [Add an additional sheet if necessary]	Repairs or Other Maintenance Needed?*	Corrective Action Required?	Date on Which Maintenance or Corrective Action First Identified?	Notes		
1. CE and SSF	Yes X N	Yes 📑 No				
2.	Yes NO	☐Yes ☐ No				
3.	Yes NO	□Yes □ No				
4.	Yes NC	☐Yes ☐ No				
5.	Yes NC	☐Yes ☐ No				
6.	Yes NC	□Yes □ No				
7.	Yes NC	□Yes □ No				
8.	Yes NC	□Yes □ No				
9.	Yes NC	□Yes □ No				
10.	□Yes □ NC	□Yes □ No				

Contractor or Subcontractor Certification and Signature					
to assure that qualified personnel properly gathered a persons directly responsible for gathering the informa	nd evaluated the information submitted. Based on my inqu	achments were prepared in accordance with a system designed uiry of the person or persons who manage the system, or those ledge and belief, true, accurate, and complete. I am aware that t for knowing violations."			
Signature of Contractor or Subcontractor: _	Arthur Genuario	Date:			
Printed Name and Affiliation:Wakefield Homes					
	Certification and Signature by Permittee (reverse for instructions)	(see			
"I certify under penalty of law that I have read and understand this document and that this document and all attachments were prepared 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 of Permittee or "Duly Authorized Representative":	Arthur Genuario	Date: 10/24/23			
Printed Name and Affiliation:Wakefil	ed Homes				

SITE INSPECTION REPORT

DATE: ___10/25/23___





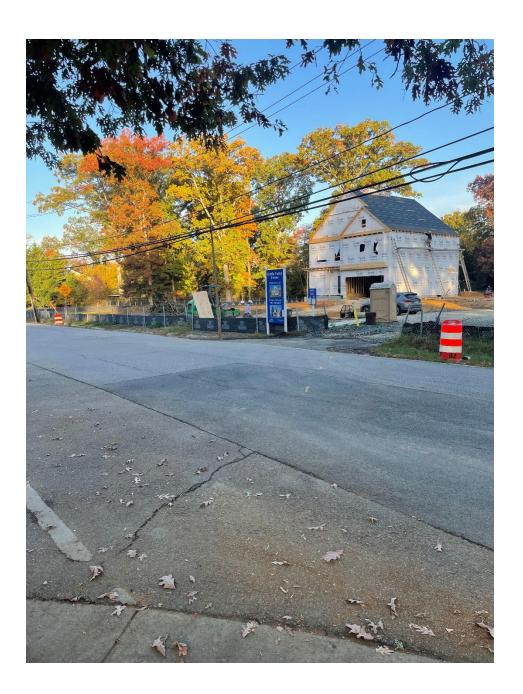
General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/25/23	
Inspector Name, Title & Contact Information Arthur Genuario							
Present Phase of Cor	struction	construction					
Inspection Location On site – 2804 Boswell Avenue							
Standard Freque Per the Virginia Gene four business days or	Inspection Frequency: Standard Frequency: **Devery four (4) business days Every 5 days and within 24 hours of a 0.25" rain Per the Virginia General Permit No.: VAR10 (effective July 1, 2014 and expiring June 30, 2019), inspections shall be conducted at a frequency of (i) at least once every four business days or (ii) at least once every five business days and no later than 48 hours following a measurable storm event. In the event that a measurable storm event occurs when there are more than 48 hours between business days, the inspection shall be conducted on the next business day						
If yes, how did yo □ Rain gauge c	Was this inspection triggered by a 0.25" storm event? \[\textstyle \text{Yes} \] \[\textstyle \text{NO} \] If yes, how did you determined whether a 0.25" storm event has occurred? Rain gauge on site \[\textstyle \text{Weather station representative of site. Specify weather station source:} \] Total rainfall amount that triggered the inspection (in inches):						
Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? Yes "yes", complete the following: - Describe the conditions that prevented you from conducting the inspection in this location: - Location(s) where conditions were found:							

Condition and Effectiveness of Erosion and Sediment (E&S) Controls							
Type/Location of E&S Control [Add an additional sheet if necessary]	Repairs or Other Maintenance Needed?*	Corrective Action Required?	Date on Which Maintenance or Corrective Action First Identified?	Notes			
construction entrance	xYes NO	□X Yes □ No	Same day	Dirt spilled off truck during hauling to the site. Spilled at intersection of Sherwood hall and Shelhorn. Dirt was shoveled off and street sweep sent to fix. Street sweep also hit all of shelhorn, Sherwood hall and construction entrance at boswell. VDOT notified and			
2.	Yes NO	□Yes □ No		acknowledged the incident and it's repair. No longer an issue			
3.	Yes NO	□Yes □ No					
4.	Yes NO	☐Yes ☐ No					
5.	Yes NO	☐Yes ☐ No					
6. 7.	Yes NO	☐Yes ☐ No					
8.	Yes NO	□Yes □ No					
9.	Yes NO	□Yes □ No					
10.	Yes NO	□Yes □ No					

	Contractor or Subcontractor Certification	and Signature				
"I certify under penalty of law that I have read and und to assure that qualified personnel properly gathered a persons directly responsible for gathering the informat there are significant penalties for submitting false info	nd evaluated the information submitted. Based or tion, the information submitted is, to the best of n	my inquiry of the person or persons my knowledge and belief, true, accurat	who manage the system, or those			
Signature of Contractor or Subcontractor:Arthur Genuario Date:10/25/23						
Printed Name and Affiliation:Wakefield Homes						
	Certification and Signature by Pern reverse for instructions)	nittee (see				
"I certify under penalty of law that I have read and understand this document and that this document and all attachments were prepared 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 of Permittee or "Duly Authorized Representative":	Arthur Genuario	Date: 10/2 !	5/23			
Printed Name and Affiliation:Wakefiled Homes						

SITE INSPECTION REPORT

DATE: ___10/27/23___





General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/27/23	
Inspector Name, Title & Contact Information Arthur Genuario							
Present Phase of Cor	struction	construction					
Inspection Location On site – 2804 Boswell Avenue							
Inspection Frequency: Standard Frequency: **Devery four (4) business days Every 5 days and within 24 hours of a 0.25" rain Per the Virginia General Permit No.: VAR10 (effective July 1, 2014 and expiring June 30, 2019), inspections shall be conducted at a frequency of (i) at least once every four business days or (ii) at least once every five business days and no later than 48 hours following a measurable storm event. In the event that a measurable storm event occurs when there are more than 48 hours between business days, the inspection shall be conducted on the next business day							
If yes, how did yo □ Rain gauge c	Was this inspection triggered by a 0.25" storm event? Yes No If yes, how did you determined whether a 0.25" storm event has occurred? Rain gauge on site Weather station representative of site. Specify weather station source: Total rainfall amount that triggered the inspection (in inches):						
Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? "yes", complete the following: - Describe the conditions that prevented you from conducting the inspection in this location: - Location(s) where conditions were found:							

Condition and Effectiveness of Erosion and Sediment (E&S) Controls						
Type/Location of E&S Control [Add an additional sheet if necessary]	Repairs of Other Maintena Needed?	ance	Corrective Action Required?	Date on Which Maintenance or Corrective Action First Identified?	Notes	
1. CE and SSF	□Yes [X NO	□Yes □ No		Touched up and working fine	
2.	Yes [□NO	□Yes □ No			
3.	□Yes [NO	□Yes □ No			
4.	□Yes [□ NO	□Yes □ No			
5.	□Yes [□ NO	□Yes □ No			
6.	□Yes [□ NO	□Yes □ No			
7.	□Yes [□ NO	□Yes □ No			
8.	□Yes [□ NO	□Yes □ No			
9.	□Yes [□ NO	□Yes □ No			
10.	□Yes [□ NO	□Yes □ No			

Contractor or Subcontractor Certification and Signature						
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Signature of Contractor or Subcontractor:	Date:					
Printed Name and Affiliation:Wakefield Homes						
	Certification and Signature by Permittee (reverse for instructions)	see				
"I certify under penalty of law that I have read and understand this document and that this document and all attachments were prepared 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 of Permittee or "Duly Authorized Representative":	Arthur Genuario	Date: 10/27/23				
Printed Name and Affiliation:Wakefiled Homes						