#### SITE INSPECTION REPORT

DATE: \_\_8/28/24\_\_\_\_

			General Info	ormation			
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	8/22/24	
Inspector Name, Titl Contact Information	e &	Arthur Genuario					
Present Phase of Cor	nstruction						
Inspection Location On site – 2804 Boswell Avenue							
Standard Freque Per the Virginia Gene four business days or	Inspection Frequency:       Standard Frequency:       Image: Weight of the standard Frequency						
If yes, how did ye Rain gauge c	Was this inspection triggered by a 0.25" storm event?       If ves       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):       Image: No						
<b>"yes", comp</b> - Describe	<b>he that any</b> l <b>ete the fo</b> e the conc	portion of your site was unsafe					

	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. E&S	Yes X NO	Yes 🗙 No		Stable			
2. SSF	Yes X NO	Yes X No		Stable			
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	□ <sup>Yes</sup> □ <sup>No</sup>					
10.	Yes NO	□Yes □ No					

C	Contractor or Subcontractor Certification and Sign	ature
to assure that qualified personnel properly gathered and persons directly responsible for gathering the information	evaluated the information submitted. Based on my inquiry	ments were prepared in accordance with a system designed of the person or persons who manage the system, or those ge and belief, true, accurate, and complete. I am aware that r knowing violations."
Signature of Contractor or Subcontractor: 8/28/24	Arthur Genuario	Date:
Printed Name and Affiliation:Arthu	ur GenuarioWakefield Homes	

Certification and Signature by Permittee (see reverse for instructions)		
"I certify under penalty of law that I have read and understand this document and that this document and all attachments we to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and be there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowl	erson o elief, tru	or persons who manage the system, or those ue, accurate, and complete. I am aware that
Signature of Permittee or "Duly Authorized Representative":Arthur Genuario Printed Name and Affiliation:Arthur GenuarioWakefiled Homes	Date:	8/28/24

SITE INSPECTION REPORT

DATE: \_\_8/22/24\_\_\_\_

			General Info	ormation			
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	8/22/24	
Inspector Name, Titl Contact Information	e &	Arthur Genuario					
Present Phase of Cor	nstruction						
Inspection Location On site – 2804 Boswell Avenue							
Standard Freque Per the Virginia Gene four business days or	Inspection Frequency:       Standard Frequency:       Image: Weight of the standard Frequency						
If yes, how did ye Rain gauge c	Was this inspection triggered by a 0.25" storm event?       If ves       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):       Image: No						
<b>"yes", comp</b> - Describe	<b>he that any</b> l <b>ete the fo</b> e the conc	portion of your site was unsafe					

	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. E&S	Yes X NO	Yes 🛛 No		Properly being used.			
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	□ <sup>Yes</sup> □ <sup>No</sup>					
10.	Yes NO	□Yes □ No					

	Contractor or Subcontract	or Certification and Signature	
"I certify under penalty of law that I have read and un to assure that qualified personnel properly gathered persons directly responsible for gathering the inform there are significant penalties for submitting false inf	and evaluated the information sub ation, the information submitted is	omitted. Based on my inquiry of the person o s, to the best of my knowledge and belief, tru	r persons who manage the system, or those le, accurate, and complete. I am aware that
Signature of Contractor or Subcontractor:8/22/24	Arthur Genuario		Date:
Printed Name and Affiliation:A	rthur Genuario	_Wakefield Homes	

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Signature of Permittee or         "Duly Authorized Representative":Arthur Genuario         Printed Name and Affiliation:Arthur GenuarioWakefiled Homes	Date:	8/22/24

SITE INSPECTION REPORT

DATE: \_\_\_\_8/16/24\_\_\_\_

			General Inf	ormation				
Name of Project	2804 Bos	well Avenue	ell Avenue CGP Tracking No. Inspection Date 8/12/24					
Inspector Name, Title &         Contact Information         Arthur Genuario								
Present Phase of Cor	nstruction							
Inspection Location		On site – 2804 Boswell Avenue						
Standard Freque Per the Virginia Gene four business days or	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 y Rain gauge c	Was this inspection triggered by a 0.25" storm event?       If 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):       Image: No							
<b>"yes", comp</b> - Describe	ne that any plete the fo e the conc	v portion of your site was unsafe						
	its) where							

	Co	ndition and Effectiv	reness of Erosion and Sec	diment (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. SSF	Yes NO	Yes No	Upright and stable
2.	Yes NO	□Yes □ No	
3.	Yes NO	□Yes □ No	
4.	Yes NO	□Yes □ No	
5.	Yes NO	□Yes □ No	
6.	Yes NO	□ <sup>Yes</sup> □ <sup>No</sup>	
7.	Yes NO	□Yes □ No	
8.	Yes NO	□ <sup>Yes</sup> □ <sup>No</sup>	
9.	Yes NO	□ <sup>Yes</sup> □ <sup>No</sup>	
10.	Yes NO	□Yes □ No	

Contractor or Subcontractor Certification and Signature

"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 Contractor or Subcontractor: 8/16/24	Arthur Genuario_		Date:
Printed Name and Affiliation:	Arthur Genuario	_Wakefield Homes	

Certification and Signature by Permittee (see reverse for instructions)		
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Signature of Permittee or "Duly Authorized Representative":Arthur Genuario Printed Name and Affiliation:Arthur GenuarioWakefiled Homes	Date:	8/16/24

SITE INSPECTION REPORT

DATE: \_\_\_\_8/12/24\_\_\_\_

			General Inf	ormation			
Name of Project	me of Project 2804 Boswell Avenue CGP Tracking No. Inspection Date 8/12/24						
Inspector Name, Titl Contact Information	e &	Arthur Genuario					
Present Phase of Cor	nstruction						
Inspection Location		On site – 2804 Boswell Avenue					
Standard Freque Per the Virginia Gene four business days or	Inspection Frequency:       Standard Frequency:       Image: Comparison of the comparison						
If yes, how did y Rain gauge c	ou determi on site	y a 0.25" storm event? Yes ined whether a 0.25" storm even Weather station representc iggered the inspection (in inche	itive of site. Specify w	eather station source:			
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 NO	Yes No	All functioning correctly after the weeks storms
2.	Yes NO	□Yes □ No	
3.	Yes NO	□Yes □ No	
4.	Yes NO	□Yes □ No	
5.	Yes NO	□Yes □ No	
6.	Yes NO	□ <sup>Yes</sup> □ <sup>No</sup>	
7.	Yes NO	□Yes □ No	
8.	Yes NO	□ <sup>Yes</sup> □ <sup>No</sup>	
9.	Yes NO	□ <sup>Yes</sup> □ <sup>No</sup>	
10.	Yes NO	∏Yes ∏ No	

Contractor or Subcontractor Certification and Signature

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Signature of Contractor or Subcontractor: 8/12/24	Arthur Genuario_		Date:
Printed Name and Affiliation:	Arthur Genuario	_Wakefield Homes	

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Signature of Permittee or "Duly Authorized Representative":Arthur Genuario Printed Name and Affiliation:Arthur GenuarioWakefiled Homes	Date:	8/12/24

#### SITE INSPECTION REPORT

DATE: \_\_\_\_8/7/24\_\_\_\_

			General Inf	ormation			
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	8/7/24	
Inspector Name, Titl Contact Information	e &	Arthur Genuario					
Present Phase of Cor	nstruction						
Inspection Location	Inspection Location On site – 2804 Boswell Avenue						
Standard Freque Per the Virginia Gene four business days or	Inspection Frequency:       Standard Frequency:       Image: Very four (4) business days       Image: 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 y Rain gauge c	ou determi on site	y a 0.25" storm event? Yes ined whether a 0.25" storm ever Weather station represento iggered the inspection (in inche	itive of site. Specify w	eather station source:			
Unsafe Conditions for Inspection         Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5?       Image: Second Secon							

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. no items	Yes NO	Yes No
2.	Yes NO	Yes No
3.	Yes NO	Tres 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: 8/7/24	Arthur Genuario_		Date:
Printed Name and Affiliation:	Arthur Genuario	_Wakefield Homes	

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Signature of Permittee or "Duly Authorized Representative":Arthur Genuario Printed Name and Affiliation:Arthur GenuarioWakefiled Homes	Date:	8/7/24					

# SITE INSPECTION REPORT

DATE: \_8/2/24\_\_\_\_



	General Information							
Name of Project	2804 Bos	swell Avenue	CGP Tracking No.		Inspection Date	8/2/24		
Inspector Name, Titl Contact Information		Arthur Genuario						
Present Phase of Cor	nstruction							
Inspection Location	Inspection Location On site – 2804 Boswell Avenue							
Standard Freque Per the Virginia Gene four business days or	Inspection Frequency:       Standard Frequency:       Image: Value of the standard frequency:       Image: Value of th							
If yes, how did y Rain gauge o	ou determi on site	y a 0.25" storm event? Thes ined whether a 0.25" storm eve Weather station represent iggered the inspection (in inche	<b>nt has occurred?</b> ative of site. Specify w	reather station source:				
Unsafe Conditions for Inspection Did you determine that any portion of your site was unsafe for inspection per CGP Part 4.1.5? Yes No If "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. silt fence and CE	Yes X NO	∏Yes X No		Clean street after large rain storm and high gusts. Everything working and no issues			
2.	Yes NO	□Yes □ No					
3.	Yes NO	□Yes □ No					
4.	Yes NO	□Yes □ No					
5.	Yes NO	□Yes □ No					
6.	Yes NO	□ <sup>Yes</sup> □ No					
7.	Yes NO	□Yes □ No					
8.	Yes NO	□ <sup>Yes</sup> □ No					
9.	Yes NO	□ <sup>Yes</sup> □ <sup>No</sup>					
10.	Yes 🗌 NO	Yes No					

Contractor or Subcontractor Certification and Signature							
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Signature of Contractor or Subcontra 8/2/24	ctor:Arthur Ger	nuario	Date:				
Printed Name and Affiliation:	Arthur Genuario	Wakefield Homes					

Certification and Signature by Permittee (see reverse for instructions)						
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Signature of Permittee or "Duly Authorized Representative":Arthur Genuario Printed Name and Affiliation:Arthur GenuarioWakefiled Homes	Date: 8/2/24					