SITE INSPECTION REPORT

DATE: __10/2/24____

General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/2/24	
Inspector Name, Title & Arthur Genuario Arthur Genuario							
Present Phase of 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? _Yes _XNo 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 "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	Yes X NO	□Yes ☒ No		Rain not impacting SSF or CE		
2. SSF	Yes X 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					
"I certify under penalty of law that I have read and under to assure that qualified personnel properly gathered and persons directly responsible for gathering the information there are significant penalties for submitting false information	evaluated the information submitted. Based n, the information submitted is, to the best o	on my inquiry of the person or f my knowledge and belief, true	persons who manage the system, or those, accurate, and complete. I am aware that		
Signature of Contractor or Subcontractor:	Arthur Genuario		Date:		
Printed Name and Affiliation:Arthu	ır GenuarioWakefield H	lomes			
	Certification and Signature by Pe				
"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":Art /24			10/2		
Printed Name and Affiliation:Arthur Genuari	ioWakefiled Homes				

SITE INSPECTION REPORT

DATE: __10/7/24____

General Information								
Name of Project	2804 Bos	swell Avenue	Il Avenue CGP Tracking No. Inspection Date 10/7/24					
Inspector Name, Title & Contact Information Arthur Genuario								
Present Phase of 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								
Was this inspection triggered by a 0.25" storm event? \[\textstyle \text{Yes} \text{XNO} \] If yes, how did you determined whether a 0.25" storm event has occurred? Rain gauge on site \[\text{Weather station representative of site. Specify weather station source:} \] 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	□Yes ☒ NO	□Yes ☒ No		CE no erosion spread due to weather		
2. SSF	Yes X NO	☐Yes ☒ No		SSF intact		
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					
"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. It is to the large $ ext{tion}$, the information submitted is, to the $ ext{l}$	Based on my inquiry of the person on Dest of my knowledge and belief, tru	persons who manage the system, or those e, accurate, and complete. I am aware that		
Signature of Contractor or Subcontractor:	Arthur Genuario		Date:		
Printed Name and Affiliation:Art	hur GenuarioWakefi	eld Homes			
	Certification and Signature I				
	reverse for instruc	tions)			
"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":/24	Arthur Genuario	Date:	10/7		
Printed Name and Affiliation:Arthur Genu	arioWakefiled Homes				

SITE INSPECTION REPORT

DATE: __10/11/24____

General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/11/24	
Inspector Name, Title & Arthur Genuario Arthur Genuario							
Present Phase of 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	Was this inspection triggered by a 0.25" storm event? _Yes _XNO 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:						
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	□Yes X NO	□Yes ☒ No		CE working	
2. SSF	Yes X NO	☐Yes ☒ No		SSF working	
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				
"I certify under penalty of law that I have read and understand this document and that this document and all attachments of the law 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 knowing the possibility.	person or persons who manage the system, or those belief, true, accurate, and complete. I am aware that			
Signature of Contractor or Subcontractor:Arthur Genuario	Date:			
Printed Name and Affiliation:Arthur GenuarioWakefield Homes				
Certification and Signature by Permittee (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: 10/11			
Printed Name and Affiliation:Arthur GenuarioWakefiled Homes				

SITE INSPECTION REPORT

DATE: __10/16/24____

General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/16/24	
Inspector Name, Title & Arthur Genuario							
Present Phase of 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	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		
1. CE	□Yes □X NO	□Yes ☒ No		CE had to be adjusted after someone drove over it but fixed same day		
2. SSF	Yes X NO	□Yes X No		SSF working		
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					
"I certify under penalty of law that I have read and under to assure that qualified personnel properly gathered and persons directly responsible for gathering the informatio there are significant penalties for submitting false inform	l evaluated the information submitted. Based on, the information submitted is, to the best	d on my inquiry of the person or of my knowledge and belief, tru	persons who manage the system, or those e, accurate, and complete. I am aware that		
Signature of Contractor or Subcontractor:	Arthur Genuario		Date:		
Printed Name and Affiliation:Arthu	ur GenuarioWakefield	Homes			
	Certification and Signature by P				
"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":Art /24			10/16		
Printed Name and Affiliation:Arthur Genuar	rioWakefiled Homes		<u> </u>		

SITE INSPECTION REPORT

DATE: __10/21/24____

General Information								
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/21/24		
Inspector Name, Title Contact Information	e &	Arthur Genuario						
Present Phase of Cor	struction							
Inspection Location On site – 2804 Boswell Avenue								
Inspection Frequency: Standard Frequency: **Standard Frequency: **Description Frequency: **De								
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		
1. SSF	□Yes X NO	□Yes ☒ No		E&S controls working fine		
2. CE	Yes X NO	☐Yes 区 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						
"I certify under penalty of law that I have read and understand this document and that this document and all attachments verto 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 knowledge.	person or persons who manage the system, or those pelief, true, accurate, and complete. I am aware that					
Signature of Contractor or Subcontractor:Arthur Genuario	Date:					
Printed Name and Affiliation:Arthur 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 knowledge.	person or persons who manage the system, or those belief, true, accurate, and complete. I am aware that					
Signature of Permittee or "Duly Authorized Representative":Arthur Genuario	Date: 10/21					
Printed Name and Affiliation:Arthur GenuarioWakefiled Homes						

SITE INSPECTION REPORT

DATE: __10/25/24____

General Information									
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/25/24			
Inspector Name, Title Contact Information	e &	Arthur Genuario							
Present Phase of Cor	struction								
Inspection Location On site – 2804 Boswell Avenue									
Inspection Frequency: Standard Frequency: **Standard Frequency: **Description Frequency: **Standard Frequency: **Description Frequency: **Descr									
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. SSF	□Yes X NO	□Yes ☒ No		Functioning properly	
2. CE	Yes X NO	☐Yes 🗵 No		Functioning properly	
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						
"I certify under penalty of law that I have read and under to assure that qualified personnel properly gathered and persons directly responsible for gathering the informatio there are significant penalties for submitting false inform	l evaluated the information submitted. Based on, the information submitted is, to the best of	on my inquiry of the person or p my knowledge and belief, true,	persons who manage the system, or those accurate, and complete. I am aware that			
Signature of Contractor or Subcontractor:Arthur Genuario Date:10/25/24						
Printed Name and Affiliation:Arthu	ur GenuarioWakefield Ho	omes	_			
	Certification and Signature by Perreverse for instructions)	rmittee (see				
"I certify under penalty of law that I have read and under to assure that qualified personnel properly gathered and persons directly responsible for gathering the informatio there are significant penalties for submitting false inform	rstand this document and that this document I evaluated the information submitted. Based on, the information submitted is, to the best of	on my inquiry of the person or p my knowledge and belief, true,	persons who manage the system, or those accurate, and complete. I am aware that			
Signature of Permittee or "Duly Authorized Representative":Art /24	thur Genuario	Date:	10/25			
Printed Name and Affiliation:Arthur Genuar	rioWakefiled Homes					

SITE INSPECTION REPORT

DATE: __10/31/24____

General Information							
Name of Project	2804 Bos	well Avenue	CGP Tracking No.		Inspection Date	10/31/24	
Inspector Name, Title Contact Information	e &	Arthur Genuario					
Present Phase of Cor	struction						
Inspection Location On site – 2804 Boswell Avenue							
Inspection Frequency: Standard Frequency: **Standard Frequency: **Description Frequency: **Standard Frequency: **Description Frequency: **Descr							
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. SSF	□Yes □X NO	□Yes ☒ No		No issues	
2. CE	Yes X NO	☐Yes 🗵 No		Functioning properly	
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						
"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 between there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing	erson or persons who manage the system, or those lief, true, accurate, and complete. I am aware that					
Signature of Contractor or Subcontractor:Arthur Genuario	Date:					
Printed Name and Affiliation:Arthur 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 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: 10/31					
Printed Name and Affiliation:Arthur GenuarioWakefiled Homes						