SECTION 14

SITE INSPECTION REPORT

DATE: __5/8/25____

General Information									
Name of Project	2804 Bos	swell Avenue	CGP Tracking No.		Inspection Date	5/8/25			
Inspector Name, Title & Contact Information		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									
Was this inspection triggered by a 0.25" storm event?									
"yes", comp - Describe	ne that any lete the fo 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. CE and SSF	Yes X NO	☐Yes ☒ No						
2. intersection	X Yes NO	☐X Yes ☐ No		Mild rain. No issues in the street				
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 ar persons directly responsible for gathering the informat there are significant penalties for submitting false infor	nd evaluated the information submitted. Based o ion, the information submitted is, to the best of	n my inquiry of the person or pers my knowledge and belief, true, acc	sons who manage the system, or those curate, and complete. I am aware that					
Signature of Contractor or Subcontractor:5/8/25	Arthur Genuario	Dat	te:					
Printed Name and Affiliation:	Wakefield Homes							
Certification and Signature by Permittee (see reverse for instructions)								
"I certify under penalty of law that I have read and und to assure that qualified personnel properly gathered ar persons directly responsible for gathering the informat there are significant penalties for submitting false infor	nd evaluated the information submitted. Based o ion, the information submitted is, to the best of	n my inquiry of the person or pers my knowledge and belief, true, acc	sons who manage the system, or those curate, and complete. I am aware that					
Signature of Permittee or								
"Duly Authorized Representative":A	Arthur Genuario	Date: 5/	/8/25					
Printed Name and Affiliation:Wakefile	ed Homes							