

Construction Site Reporting Form

Name of Complainant: _____ Phone Number: _____

Municipality: _____ Address of Construction Site: _____

Date of Most Recent Rain Event: _____ Date/Time of Inspection: _____

County Conservation District w/Jurisdiction: _____

On-Site Observations		Description	Location
Inadequate BMPs			
Silt Fence			
Construction Entrance			
Straw Bales			
Seeding/Landscaping			
Sediment Traps			
Inlet Protection			
Outlet Protection			
Housekeeping			
Trash/Litter			
Construction Debris			
Spills of hazardous materials			
On-site erosion			
Off-Site Observations		Description	Location
Mud/dirt on roads			
Muddy ditch/stream			
Blowing dust			
Trash/Litter			
Oily sheen in stream			
Construction debris			

Compliance/Enforcement (to be completed by CCD staff)

Date of Inspection	Time	Inspector	
Description of Inspection Findings			
Enforcement Action Y/N	Date(s):		
	Verbal Notice		Notice of Violation
	Administrative Action		Civil Penalty
	Other (describe)		

Additional notes to file: _____

Follow-up with Complainant: _____

