

ILLCIT DISCHARGE FIELD SCREENING PROGRAM
Data Collection Form

OUTFALL #: _____ **Date:** _____ **Time:** _____

TIME SINCE LAST RAIN: ≥72 hours <72 hours
QUANTITY OF LAST RAIN: ≥0.1 inches <0.1 inches
INSPECTION TEAM: _____

SITE DESCRIPTION:

LOCATION (Narrative Description): _____

STRUCTURE TYPE: OPEN CHANNEL MANHOLE OUTFALL OTHER: _____

DOMINANT WATERSHED LAND USES: INDUSTRIAL COMMERCIAL RESIDENTIAL UNKNOWN
OTHER: _____

FLOW ESTIMATION:

WAS FLOW OBSERVED? NO YES IF YES, PLEASE ANSWER a. - d. BELOW.
a. WIDTH OF WATER SURFACE (feet): _____
b. APPROXIMATE DEPTH OF WATER (feet): _____
c. APPROXIMATE FLOW VELOCITY (feet per second): _____
d. FLOW RATE (cubic feet per second) = a x b x c = _____

VISUAL OBSERVATIONS:

WAS A PHOTO TAKEN? NO YES (Roll and Photo Number: _____)

ODOR: NONE MUSTY SEWAGE ROTTEN EGGS SOUR MILK OTHER: _____

COLOR: CLEAR RED YELLOW BROWN GREEN GREY OTHER: _____

CLARITY: CLEAR CLOUDY OPAQUE

FLOATABLES: NONE OILY SHEEN GARBAGE/SEWAGE OTHER: _____

DEPOSITS/STAINS: NONE SEDIMENTS OILY OTHER: _____

VEGETATION CONDITION: NONE NORMAL EXCESSIVE GROWTH INHIBITED GROWTH

STRUCTURAL CONDITION: NORMAL CONCRETE CRACKING METAL CORROSION OTHER: _____

BIOLOGICAL: MOSQUITO LARVAE BACTERIA/ALGAE OTHER: _____

FIELD ANALYSIS:

WATER TEMP: _____ °F / °C CHLORINE (Total): _____ mg/l
pH: _____ COPPER: _____ mg/l
PHENOL: _____ mg/l DETERGENTS: _____ mg/l

WAS A LABORATORY SAMPLE COLLECTED? NO YES
(if yes attach copy of chain-of-custody record)

COMMENTS: _____

DATA SHEET FILLED OUT BY: (signature): _____ **DATE:** _____
(print name): _____

This form was modified from *Municipal Urban Runoff Program: A How-To Guide For Developing Urban Runoff Programs for Small Municipalities*, by the City of Monterey, City of Santa Cruz, California Coastal Commission, Monterey Bay National Marine Sanctuary, Association of Monterey Bay Area Governments, Woodward-Clyde, and Central Coast Regional Water Quality Control Board, 1998.