



**CERTIFIED INSPECTION REPORT FOR PROPER OPERATION & MAINTENANCE OF PRIVATELY OWNED STORMWATER MANAGEMENT SYSTEM**

This responsibility is pursuant to Rule 62-624.440(2), F.A.C., which requires National Pollutant Discharge Elimination System (NPDES) permit holders to implement a stormwater management program that includes pollution prevention measures, treatment or removal techniques, stormwater monitoring, use of legal authority, and other appropriate means to control the quality of stormwater discharged from a Municipal Separate Storm Sewer System (MS4). Thus, any discharges into the City’s storm sewer system are subject to City regulations and inspections for compliance with these standards.

**1. STORMWATER MANAGEMENT SYSTEM INFORMATION:**

Facility Name: \_\_\_\_\_

Permit No.: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Property Address: \_\_\_\_\_ City/St/Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

**Opt in for email correspondence only regarding Stormwater Management System Certification**

2. I hereby certify that I performed an inspection of the stormwater system at the above address or named facility on \_\_\_\_\_ and further certify that the system is being operated and maintained per original design and is not causing or contributing to a violation of State Water Quality Standards.

By: \_\_\_\_\_  
Signature of Certifying Agent Name

|                          |  |
|--------------------------|--|
| <b>FOR ENGINEER ONLY</b> |  |
| Company Name:            |  |
| Company Address:         |  |
| City/State/Zip:          |  |
| Phone Number:            |  |
| Date:                    |  |
| FL P.E. Reg No.:         |  |

(Affix Seal)