

Section 1: Background Data

Subwatershed: SLIGO CREEK	Outfall ID: KE01A+KE01B	Today's date: 11/24/13
Time (Military): 10:20	Investigators: POB	Photo #s:
Name of Street Address: MAPLE AVE	Rainfall (in): Last 24 hours: <input type="checkbox"/> Last 48 hours: <input type="checkbox"/>	
Land Use in Drainage Area (Check all that apply): <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input checked="" type="checkbox"/> Open Space <input checked="" type="checkbox"/> Institutional		
Known Industries: _____ Notes (e.g., origin of outfall, if known): _____		

Section 2: Outfall Description & Quantitative Characterization

LOCATION	MATERIAL	SHAPE	DIMENSIONS (IN.)	SUBMERGED	
<input checked="" type="checkbox"/> Closed Pipe	<input checked="" type="checkbox"/> RCP <input type="checkbox"/> Steel <input type="checkbox"/> CMP <input type="checkbox"/> PVC <input type="checkbox"/> HDPE	<input checked="" type="checkbox"/> Circular <input type="checkbox"/> Elliptical <input type="checkbox"/> Box <input type="checkbox"/> Other: _____	<input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Triple <input type="checkbox"/> Other: _____	Circular, diameter: _____ Box: h - _____ w - _____ Elliptical: h - _____ w - _____	In Water: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully With Sediment: <input checked="" type="checkbox"/> No <input type="checkbox"/> Partially <input type="checkbox"/> Fully
<input type="checkbox"/> Open drainage	<input type="checkbox"/> Concrete <input type="checkbox"/> Rip-rap <input type="checkbox"/> Earthen <input type="checkbox"/> Other: _____				
<input type="checkbox"/> In-Stream					
Flow Present?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, Skip to Section 5</i>	Flow Description	<input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Substantial		
PARAMETER	RESULT	UNIT	EQUIPMENT		
Ammonia	KE01A: 0.75 KE01B: 0.41	mg/L	LaMotte 1200		

Section 4: Physical Indicators for Flowing Outfalls Only

Are Any Physical Indicators Present in the flow? Yes No *(If No, Skip to Section 5)*

INDICATOR	CHECK IF Present	DESCRIPTION	RELATIVE SEVERITY INDEX (1-3)		
Odor	<input checked="" type="checkbox"/>	<input type="checkbox"/> Sewage <input type="checkbox"/> Rancid/sour <input type="checkbox"/> Petroleum/gas <input type="checkbox"/> Sulfide <input checked="" type="checkbox"/> Other: DETERGENT	<input checked="" type="checkbox"/> 1 - Faint	<input type="checkbox"/> 2 - Easily detected	<input type="checkbox"/> 3 - Noticeable from a distance
Color	<input checked="" type="checkbox"/>	<input type="checkbox"/> Clear <input type="checkbox"/> Brown <input checked="" type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Green <input type="checkbox"/> Orange <input type="checkbox"/> Red <input type="checkbox"/> Other:	<input checked="" type="checkbox"/> 1 - Faint colors in sample bottle	<input type="checkbox"/> 2 - Clearly visible in sample bottle	<input type="checkbox"/> 3 - Clearly visible in outfall flow
Turbidity	<input type="checkbox"/>	See severity	<input type="checkbox"/> 1 - Slight cloudiness	<input type="checkbox"/> 2 - Cloudy	<input type="checkbox"/> 3 - Opaque
Floatables - Does Not Include Trash!!	<input checked="" type="checkbox"/>	<input type="checkbox"/> Sewage (Toilet Paper, etc.) <input checked="" type="checkbox"/> Sludg <input type="checkbox"/> Petroleum (oil sheen) <input type="checkbox"/> Other:	<input type="checkbox"/> 1 - Few/slight	<input checked="" type="checkbox"/> 2 - Some	<input checked="" type="checkbox"/> 3 - Obvious

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? Yes No *(If No, Skip to Section 6)*

INDICATOR	CHECK IF Present	DESCRIPTION
Outfall Damage	<input type="checkbox"/>	<input type="checkbox"/> Spalling, Cracking or Chipping <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion
Deposits/Stains	<input type="checkbox"/>	<input type="checkbox"/> Oily <input type="checkbox"/> Flow Line <input type="checkbox"/> Paint <input type="checkbox"/> Other:
Excessive Vegetation	<input type="checkbox"/>	
Poor pool quality	<input checked="" type="checkbox"/>	<input type="checkbox"/> Odors <input checked="" type="checkbox"/> Colors <input type="checkbox"/> Floatables <input type="checkbox"/> Oil Sheen <input checked="" type="checkbox"/> Sludg <input type="checkbox"/> Excessive Algae <input type="checkbox"/> Other
Pipe benthic growth	<input checked="" type="checkbox"/>	<input type="checkbox"/> Brown <input checked="" type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Other:

KE01B

Section 6: Overall Outfall Characterization

Unlikely Potential (presence of two or more indicators) Suspect (one or more indicators with a severity of 3) Obvious

Section 7: Notes

KE01A 8.03 pH / 10.3 °C

KE01B 7.97 pH / 8.7 °C

**KE01A - had heaviest flow
five seen - about 7' depth. lots of sludg (pink)**

Handwritten text at the top left of the page, possibly a title or header.