Quarterly Visual Monitoring Form

Fill out a separate form for each sample collected (one form per outfall)

Facility				**Permit ID: 10-MA**	
Outfall No.		**Examiner's Name & Title**			
Quarter / Year:		**Date / Time Collected:**		**Date / Time Examined:**	
Rainfall Amount:		**Qualifying Storm?**	Yes No	**Runoff Source:**	Rainfall Snowmelt

Parameter	Parameter Description	Parameter Characteristics
1. Color	Does the storm water appear to have any color? **Yes** **No (Clear)**	If Yes, describe: *Yellow Brown Red Gray Other*:
2. Clarity	Is the storm water clear? **Yes** **No**	If not clear, which of the following best describes the clarity of the storm water? *Suspended Solids Milky/Cloudy Opaque Other:*
3. Oil Sheen	Can you see a rainbow effect or sheen on the water surface? **Yes** **No**	Which best describes the sheen? *Rainbow sheet Floating oil globules Other:*
4. Odor	Does the sample have an odor? **Yes** **No**	If Yes, describe: *Chemical Musty Rotten Eggs Sewage Sour Milk Oil/Petroleum Other:*
5. Floating Solids	Is there anything on the surface of the sample? **Yes** **No**	If Yes, describe: *Suds Oily Film Garbage Sewage Water Fowl Excrement Other:*
6. Suspended Solids	Is there anything suspended in the sample? **Yes** **No**	Describe:
******wait 30 minutes******		
7. Settled Solids	Is there something settled on the bottom of the sample? **Yes** **No**	Describe: (*wait 30 mins after collection, note type, size and material)*
8. Foam	Is there foam or material forming on the top of the sample surface? **Yes** **No**	Describe: (*shake bottle gently, is there foam?)*

Detail any concerns, corrective actions taken and any other indicators of pollution present in the sample. This should include the identified source if there are visible indicators present in the sample:

Storm Water Examiner's Signature and Date:

Note – Sample should be collected and analyzed in a colorless glass or plastic bottle.

Instructions for Completing the Quarterly Visual Monitoring Form

The Department requires visual monitoring of storm water as an indicator of the effectiveness of the control measures utilized in the facility's storm water pollution prevention plan. Once each quarter for the entire permit term, permittees must collect a storm water sample from each outfall and conduct a visual assessment of each of these samples. These samples should be collected in such a manner that they are representative of the storm water discharge. If there are no direct means of conveyance (i.e., pipe) for a collection sample, a sample representative of the site conditions must be collected at the discharge point closest to the waters of the State. Each assessment must be kept onsite and available for inspection and review by the Department at anytime. All inspections must be performed during daylight hours, and collected within 30 minutes of a storm event.

Fill out all information on the top of the visual monitoring form. To provide the best estimate of rainfall, use a rain gage or a website which provides this information (i.e., http://www.cocorahs.org/state.aspx?state=md). Take a grab sample in a clear container. Evaluate the sample in a well-lit area for the following parameters:

A. Color: Record the best description of the sample color in the appropriate space on the form. Color may indicate inappropriate discharge.

B. Clarity: This parameter refers to the degree of cloudiness present in the sample. It is *usually* an indication of fewer pollutants in the water if the sample is clear or transparent. If the clarity has changed since the last sample, identify what might have caused this to happen.

1. **Clear**-Sample doesn't filter out any light; can be seen through regardless of color.
2. **Cloudy-**Sample filters out some light; not clear but objects can still be identified when looking through the sample.
3. **Very Cloudy**-Sample filters out most light; objects are indiscernible when looking through the sample.
4. **Opaque**-Sample doesn't allow any light to pass through; objects cannot be seen when looking through the sample.

C. Oil Sheen: Record whether or not an oil sheen is present. If a film of iridescent color is noted on the surface of the sample or a rainbow effect appears to be floating on the surface of the water, this usually indicates oil is present.

D. Odor: If sample has no odor other than natural rainwater or snowmelt, write "NO" on the visual monitoring form. Note the presence of any of the following odors if detected: Gasoline, diesel, oil, solvents (WD-40, other petroleum products, etc.), garbage, fishy, sweet/sugary, any other unusual odors not normally present in clean runoff from the area sampled.

E. Floating Solids: A contaminated flow may contain floatable solids or liquids. Identifying floatables can aid in finding the source of the contamination. Examples of floatables are spoiled food products, oils, plant parts, solvents, sawdust, foams and fuel. Give a general description of the type of floating solids present (wood chips, leaf debris, algae, etc) in the general comments section for each sample. Identify amount of floating solids as described below.

1. **High**- More than 20% of the surface of the sample is covered with floating solids.
2. **Moderate**- Less than 20% of the surface of the sample is covered with floating solids.
3. **Slight**-Only a few floating particles observed on the surface of the sample.
4. **None**- No floating solids present on the surface of the sample.

F. Suspended solids: Record whether or not settled solids were present in the sample. Suspended solids will be suspended within the column of water and may contribute to changes in water color or clarity. Cracked or deteriorated concrete or peeling surface paint at an outfall usually indicates the presence of severely contaminated discharges. Contaminants causing this type of damage are usually very acidic or basic.

---------- WAIT 30 MINUTES ----------

G. Settled Solids: After 30 minutes has passed, give a general description of the type of settled solids present (sand, decayed plant matter, rust particles etc) in the general comments section for each sample.

H. Foam: After completing #7, shake the bottle *gently*. Record foam results on the form as they most closely match one of the descriptions listed below.

1. **None**-Most bubbles break down within ten (10) seconds of shaking; only a few large bubbles persist longer than ten (10) seconds.
2. **Moderate**-Many small bubbles are present but these bubbles persist for less than two (minutes) after shaking.
3. **High**-Many small bubbles are present and they persist longer than two (2) minutes after shaking.

Detail any concerns, corrective actions taken and any other indicators of pollution present in the sample. This should include the identified source if there are visible indicators present in the sample. The person performing test must sign and date each form.