Illicit Discharge Detection and Elimination Inspection Form

Inspection Date	
Inspector Name	
Site Location / Address	
Outfall / Discharge Point ID	
Weather Conditions	
Rain in Last 72 hrs?	
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Flow Observed?	
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Description of Discharge (odor, color, turbidity, floatables, etc.)	
Possible Source(s) of Discharge	
Actions Taken	
Recommendations / Follow Up	