

CONSTRUCTION SITE: On-Site (OS)-SWPPP Required Document

<i>SWPPP Contractor & Sub-Contractor Log</i>	
Name of Construction Site	Location of Construction Site
Company/Individual Name	Work Responsibilities
1.)	
Certified?* <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
2.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
3.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
4.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
5.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
6.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
7.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
8.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
9.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	

Instructions: Sign in when you start work, sign out when your work is completed and you will not return to the site.
***Are you a CERTIFIED CONTRACTOR?** If you are working on this site and have the potential to disturb soils or impact any BMPs, *you must sign a certification form* (with the developer) to work on site. This form must be in this OS-SWPPP box along with this sign in sheet. If you are not required to sign, please check the **box NR**. If you are, make sure your certification is in this box and **check Yes**. If you are and you have not signed the form, **check NO** and see the Project Manager to acquire a form for signing (along with developer), **only check yes** if the form is in this box!
UTILITY CONTRACTORS: If you are a UTILITY CONTRACTOR, you may only work on site if your firm has BLANKET coverage and you have a document stating you are working under that coverage. The document must be in this box! If you are PLEASE NOTE THAT under Work Responsibilities and say that you have put the form in this box, prior to working on site.

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Name of Construction Site	Location of Construction Site
Company/Individual Name	Work Responsibilities
10.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
11.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
12.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
13.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
14.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
15.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
16.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	
17.)	
Certified? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> N/R Start Date:	
Completion Date:	

NOTES: _____

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