



City of Coquitlam  
**Erosion and Sediment Control (ESC)  
 Monitoring Report**

Site **Compliant** with City of Coquitlam’s ESC requirements? Yes  No

Significant Rain Event? Yes  No

**Project Information**

Project Name: \_\_\_\_\_

Developer: \_\_\_\_\_ Contractor: \_\_\_\_\_

Location (Civic Address): \_\_\_\_\_

Site Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Inspection Summary**

Inspection Date: \_\_\_\_\_ Inspection Time: \_\_\_\_\_

Current Stage of Construction: \_\_\_\_\_

Ex: Clearing, Demolition, Excavation, Foundation, Drain Tile, Utilities, Civil, Backfill, Superstructure, Roofing, Hardscape, Road & Driveway, & Landscaping.

ESC Signage Displayed? Yes  No

**Weather, Temperature and Precipitation**

Weather: \_\_\_\_\_ Temperature (°C): \_\_\_\_\_

Precipitation at Inspection: \_\_\_\_\_ 24 hrs Prior to Inspection: \_\_\_\_\_

FlowWorks Rain Gauge Used: \_\_\_\_\_

**Discharge Requirements as per the City’s Stream and Drainage System Protection Bylaw NO. 4403, 2013**

City of Coquitlam Discharge Requirements	Turbidity	pH
Normal Conditions	25 NTU	6.5 – 8.0
During and for 24 hours following a Significant Rain Event (SRE) SRE means any precipitation event, which meets or exceeds the intensity of 25 mm per 24 hour period	100 NTU	6.5 – 8.0

## Erosion and Sediment Control Inspections

ESC Measures and Facilities	Inspected	Maintenance Required	Observations/Recommendations
<b>Gutters and Downspouts</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Access/Egress Controls</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Gravel Access Pad	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Wheel Wash	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Perimeter Control Measures</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Silt Fencing	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Temporary Drainage Swale and Sump</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Storm Inlet Protection</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Catch Basin Protection	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Disturbed Surfaces Protection</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Stockpile Surface Protection	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<b>Paved Surfaces Sweeping/Maintenance</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Internal Paved Surfaces	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Off-site Paved Surfaces	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	



## Recommendations and Action Items

Attach ESC Inspection Photos with description to this report.

ESC Monitor Name: \_\_\_\_\_ ESC Monitor Title: \_\_\_\_\_

ESC Monitor Signature: \_\_\_\_\_ ESC Monitor Date: \_\_\_\_\_

ESC Supervisor Name: \_\_\_\_\_ ESC Supervisor Title: \_\_\_\_\_

ESC Supervisor Signature: \_\_\_\_\_ ESC Supervisor Date: \_\_\_\_\_