

LOCAL SWPPP CERTIFICATION



PZ No./Tract No./NP No. _____

NOTE: This is in addition to the Construction General Requirements.

This certification is intended to provide compliance with section 4.F.5 of NPDES CAS004002 Order No R4-2010-0108.

QSD Certification:

“As the architect/engineer of record, I have selected appropriate BMPs to effectively minimize the negative impacts of this project’s construction activities on storm water quality. The project owner and contractor are aware that the selected BMPs must be installed, monitored, and maintained to ensure their effectiveness. The BMPs not selected for implementation are redundant or deemed not applicable to the proposed construction activity.”

Print Name of Qualified SWPPP Developer (QSD):

Signature of Qualified SWPPP Developer (QSD):

Date

LRP Certification:

“I certify that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to ensure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, to the best of my knowledge and belief, the information submitted is true, accurate, and complete. I am aware that submitting false and/or inaccurate information, failing to update the Local SWPPP to reflect current conditions, or failing to properly and/or adequately implement the Local SWPPP may result in revocation of grading and/or other permits or other sanctions provided by law.”

Print Name of Legally Responsible Person(LRP):

Signature of Legally Responsible Person(LRP):

Date

City of Oxnard Approval:

Reviewed and approved by: _____