



Multi-Sector General Permit (MSGP)

Corrective Action Report (CAR)

Pursuant to Permit Part 3.2, this form must be completed within 30 days of a discovery of any condition(s) listed in Part 3.1.1

Submit the completed form to stormwatercompliance@azdeq.gov or mail to:

ADEQ
 Surface Water Permits, MC 5415A-1
 1110 W. Washington Street
 Phoenix, AZ 85007

1. Facility Information

Name of Permittee:

AZPDES Permit ID#

2. Condition Requiring Corrective Action (Part 3.1.1)

Condition triggering Corrective Action (choose all that apply):

- An unauthorized discharge (e.g., non-stormwater discharge not authorized by this or another AZPDES permit to a Water of the U.S. or to a regulated MS4);
- The permittee becomes aware, or ADEQ determines, that a discharge from the site causes or contributes to an exceedance of applicable water quality standard(s);
- The permittee becomes aware, or ADEQ determines, that a discharge from the site to a water listed as not-attaining exceeds an adopted wasteload allocation (WLA) for the pollutant(s) causing the impairment;
- The permittee becomes aware, or ADEQ determines, that a discharge from the site to an Outstanding Arizona Water (OAW) is degrading water quality;
- A discharge from the site violates a numeric effluent limitation guideline (ELG).

3. Within 72 Hours of Discovery of the Condition Requiring Corrective Action (Part 3.2.1)

Within 72 hours of discovery of the incident that lead to Corrective Action, describe the following action items

How was incident discovered?

Condition that triggered Corrective Action:

Provide description of problem/ incident, including material type/ amount involved:

Date/ time problem was identified:

Location of the incident:



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The cause of the spill, leak, other release, or sampling exceedance:

List Outfall Name(s) and include corresponding locations (latitude/ longitude) :

Receiving water(s) affected:
 Is receiving water (check all that apply): Impaired Not-attaining OAW None

4. Within 14 Calendar Days of Discovery of the Condition Requiring Corrective Action (Part 3.2.2)

Within 14 calendar days of discovery (or before the next measurable storm event if possible, whichever is sooner) describe the following action items taken

Summary of Corrective Actions taken or to be taken:

Modifications to control measures or preventative measures taken, in order to prevent the reoccurrence of a discharge of a pollutant(s) or prevent further exceedance(s);

Was Stormwater Pollution Prevention Plan (SWPPP) Modification required: No Yes
 If "yes" describe SWPPP modification(s):

Date Corrective Action initiated or will be initiated:

Date Corrective Action completed or expected to be completed:

Was the event that prompted corrective action, related to a sampling result: No Yes
 If "yes", what is the date the DMR was or will be submitted:

Describe any contingency actions to be taken, including accelerated monitoring (if required):

If Corrective Actions cannot be completed within the required timeframes, describe reasons for the delay, provide an implementation schedule, and the back-up practices in place:

If no Corrective Action was taken, describe the basis for that determination:

If any MS4 was affected, please name the MS4(s):



Multi-Sector General Permit (MSGP)

Provide Dates and Result of the Last 4 Stormwater Inspections

Date: _____ Result of Inspection: In Compliance Modified, repaired, or replaced control measures

Date: _____ Result of Inspection: In Compliance Modified, repaired, or replaced control measures

Date: _____ Result of Inspection: In Compliance Modified, repaired, or replaced control measures

Date: _____ Result of Inspection: In Compliance Modified, repaired, or replaced control measures

Certification: I certify, under penalty of law, that the information and descriptions have been made under my direction and supervision, and under a system designed to ensure that qualified personnel properly gathered and evaluated the information used to determine whether the applicable requirements have been met. I am aware that there are significant penalties for false certification including the possibility of fine and imprisonment.

Signature: _____

Title: _____

Date: _____

Print and place a copy of this form in your SWPPP.