

OUTFALL RECONNAISSANCE INVENTORY/ INSPECTION/ SAMPLE COLLECTION FIELD SHEET

Section 1: Background Data

| | | | |
|---|-----------------|--------------------|----------------|
| Section: | | Outfall ID: | |
| Today's date: | | Time (Military): | |
| Investigators: | | Form completed by: | |
| Temperature (°F): | Rainfall (in.): | Last 24 hours: | Last 48 hours: |
| Latitude: | Longitude: | GPS Unit: | |
| Camera: | | Photo #s: | |
| Land Characterization (Check all that apply): | | | |
| Grass | | Open Space | |
| Impervious | | Priority Area | |
| Other: | | | |
| Notes (e.g., origin of outfall, if known): | | | |

Section 2: Outfall Description

| LOCATION | MATERIAL | SHAPE | DIMENSIONS (IN.) | SUBMERGED | |
|--------------------------------------|--------------------------------------|----------|---------------------------------|---|---|
| Closed Pipe | RCP | CMP | Circular | Single | Diameter/Dimensions: _____ In Water: No Partially Fully With Sediment: No Partially Fully |
| | PVC | HDPE | Elliptical | Double | |
| | Steel | | Box | Triple | |
| | Other: | | Other: | Other: | |
| Open drainage | Concrete | | Trapezoid | Depth: _____ Top Width: _____ Bottom Width: _____ | |
| | Earthen | | Parabolic | | |
| | rip-rap | | Other: | | |
| | Other: | | | | |
| In-Stream | (applicable when collecting samples) | | | | |
| Flow Present? | Yes | No | <i>If No, Skip to Section 5</i> | | |
| Flow Description (If present) | Trickle | Moderate | Substantial | | |

Section 3: Quantitative Characterization

| FIELD DATA FOR FLOWING OUTFALLS | | | | |
|---------------------------------|-----------------|-------------|-----------|------------------|
| PARAMETER | RESULT | UNIT | EQUIPMENT | |
| Flow #1 | Volume | | Liter | Bottle |
| | Time to fill | | Sec | |
| Flow #2 | Flow depth | | In | Tape measure |
| | Flow width | ____' ____" | Ft, In | Tape measure |
| | Measured length | ____' ____" | Ft, In | Tape measure |
| | Time of travel | | S | Stop watch |
| Temperature | | | °F | Thermometer |
| pH | | | pH Units | Test strip/Probe |
| Ammonia | | | mg/L | Test strip |

Section 4: Physical Indicators for Flowing Outfalls Only

Are any Physical Indicators Present in the flow? Yes No (If No, Skip to Section 5)

| INDICATOR | CHECK if PRESENT | DESCRIPTION | RELEVATIVE SEVERITY INDEX (1-3) | | |
|------------------------------------|------------------|--|----------------------------------|---|---|
| | | | 1-Faint | 2-Easily detected | 3-Noticeable from a distance |
| Odor | | Sewage Rancid/sour Petroleum/gas Sulfide Other: | | | |
| Color | | Clear Brown Gray Yellow Green Orange Red Other: | 1-Faint colors in sample bottle | 2-Clearly visible in sample bottle | 3-Clearly visible in outfall flow |
| Turbidity | | See Severity | 1-Slight cloudiness | 2-Cloudy | 3-Opaque |
| Floatable -Does Not Include Trash! | | Sewage (Toilet Paper, etc) Suds Petroleum (oil sheen) Other: | 1-Few/slight; origin not obvious | 2-Some; indications of origin (e.g. possible suds or oil sheen) | 3-Some; origin clear (e.g. obvious oil sheen, suds, or floating sanitary materials) |

Section 5: Physical Indicators for Both Flowing and Non-Flowing Outfalls

Are physical indicators that are not related to flow present? Yes No (If No, Skip to Section 6)

| INDICATOR | CHECK if PRESENT | DESCRIPTION | COMMENTS |
|---------------------|------------------|---|----------|
| Outfall Damage | | Cracking or Chipping Peeling Paint Corrosion | |
| Deposits/Stains | | Oily Flow Line Paint Other: | |
| Abnormal Vegetation | | Excessive Inhibited | |
| Poor pool quality | | Odors Colors Floatables Oil Sheen Suds Excessive Algae Other: | |
| Pipe benthic growth | | Brown Orange Green Other: | |

Section 6: Overall Outfall Characterization

| | | | |
|----------|--|---|---------|
| Unlikely | Potential (presence of two or more indicators) | Suspect (one or more indicators with a severity of 3) | Obvious |
|----------|--|---|---------|

Section 7: Data Collection

| | | | | | |
|--------------------------------|------|------|---------------|-----|-----------|
| 1. Sample for the lab? | Yes | No | | | |
| 2. If yes, collected from: | Flow | Pool | | | |
| 3. Intermittent flow trap set? | Yes | No | If Yes, type: | OBM | Caulk dam |