## **Annual Comprehensive Site Compliance Evaluation**

FACILTY NAME & PERMIT: Flatrock VAG840043	AUDIT DATE:	Calendar Year covered by the audit: 2023		
BENCHMARK MONITORING (Describe Permit Requirement, Including Frequency)	Outfall #1: (Quarterly) FI Outfall #2,3,4,5,6,7 (Annu Quarterly visual monitoring	aal) Flow, TSS, pH testing		
Time Period: 1/1/2023	- 12/31/2023			
DMRs Submitted Late (List On None	utfalls):	·		
List Outfall(s) For Monitoring None	Did Not Take Place For This Reporting Period	l:		
When Outfalls Were Monitor Parameters That Are Missing	red, But Not All Parameters Were Quantified, :	List The Outfall And The Corresponding		
None				
3	3 483			
For all analytical results above	e the Benchmark value ranges, list the Outfa	ll, parameter and corresponding results:		
None				
		70x1		
Have Fuels, lubricants, coolants, hydraulic fluids, or other petroleum products been discharged on the ground or into surface waters ? (YES/NO) NO				
Have process waters been discharged to surface waters? (YES/NO) NO				

FACILTY NAME:		AUDIT YEAR:				
Flatrock		2023	2023			
	AL OUTFALL EXAMINATION	335 <b>-</b> 33 <b>-</b> 3	or whether it is incom	inlete or missing )		
(State Whether Of	1 <sup>ST</sup> QUARTER	2 <sup>ND</sup> QUARTER	3 <sup>RD</sup> QUARTER	4 <sup>TH</sup> QUARTER		
Outfall - 1	2/14/2023	4/29/2023	9/21/2023	11/22/2023		
	Complete	Complete	Complete	Complete		
Outfall - 2	2/14/2023	4/29/2023	9/21/2023	11/22/2023		
	Complete	Complete	Complete	Complete		
Outfall - 3	2/14/2023	4/29/2023	9/21/2023	11/22/2023		
	Complete	Complete	Complete	Complete		
Outfall 4	2/14/2023	4/29/2023	9/21/2023	11/22/2023		
	Complete	Complete	Complete	Complete		
Outfall 5	2/14/2023	4/29/2023	9/21/2023	11/22/2023		
	Complete	Complete	Complete	Complete		
Outfall 6	2/14/2023	4/29/2023	9/21/2023	11/22/2023		
	Complete	Complete	Complete	Complete		
Outfall						

FACILTY NAME:		AUDIT YEAR:				
Flatrock		2023				
SWPPP (State whether or not each item is	complete, inco	omplete,	or missing)			
SIGNATURE		Com	plete		8	
UPDATES, AND SIGNATURES FOR THE UPDATES Specify date and reason (e.g. high benchmark, construction/change in design, deficiency identified during routine inspection; etc) for the updates		Complete				
STAFF IDENTIFIED		Com	plete		Add Sec.	
POTENTIAL POLLUTANT SOURCE AG	CTVITIES	Com	plete	gasto		
MAP - OUTLINE OF DRAINAGE AR	EAS	VĒ	of 25 75 kg			
	006	Drainag	rainage Areas Complete		Complete	
Dump Area		Inventory of Exposed Materials		Complete		
001 Pit 005		Spills & Leaks Complete		Complete		
		Risk of Potential Pollutant Sources			Complete	
		Storage Areas Complete Measures & Controls		Structural Controls Complete		
					Complete	
l ≥ (003) l ⊣	Plant Plant		Good Housekeeping	13%	Complete	
cale		Pre	ventive Maintenance	tive Maintenance Complet		
004	Stock		Spill Prevention	Complete		
STORM WATER CONTROLS						
<ul> <li>Good housekeeping</li> <li>(including sweeping)</li> </ul>	Complete		- Employee Tra	aining	Complete	
- Preventive Maintenance	-Complete		Record Keeping	Complete		
- Spill Prevention	- Comp	lete Sediment & Erosion Control			Complete	
-			Management of Runoff		Complete	

FACILTY NAME:	AUDIT YEAR:	
Flatrock	2023	

## - ROUTINE INSPECTIONS

(Describe Permit Requirement, Including Frequency)

- -Quarterly routine facility and housekeeping inspections -Monthly Stormwater management devices
- -Monthly Outfall inspections

15	(State whether or not each inspection was completed and	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter
	specify date, or whether the inspection is incomplete, or missing.)	Complete	Complete	Complete	Complete
-	INSPECTIONS	-3/15/2023	-6/12/2023	-9/21/2023	-12/29/2023
	ADDITONAL INSPECTIONS	-1/5/2023 -2/9/2023 -3/15/2023	-4/7/2023 -5/25/2023 -6/12/2023		-10/30/2023 -11/17/2023 -12/29/2023

FACILTY NAME:	AUDIT YEAR:			
Flatrock	2023	2023		
COMPREHENSIVE SITE COMLIANCE EVALUATION	(State whether or not	ate whether or not each component is complete, incomplete, or missing.)		
Date of evaluation:	Industrial Materials	Complete		
1/11/2023	Leaks & Spills	Complete		
	Off-site Tracking	Complete		
	Pollutants Entering Stormwater Conveyance	Complete		
	Pollutants at Outfalls	Complete		
	Review of Training	Complete		
	Unauthorized Discharges Evaluation	Complete		
	Visual & Analytical Monitoring	Complete		
	SWPPP/BMP Modifications resulting from the evaluation	Complete		
	Report	Complete		

FACILTY NAME:	AUDIT YEAR:		
Flatrock	2023		
MAINTAINING ALL RECORDS	NOTES: (State whether or not each record is complete, incomplete, or missing. List the incomplete and missing records.)		
Corrective Actions	(List Corrective Actions	s and dates of each Corrective Action)	
	None	w.	
Benchmark Monitoring	Complete		
	Complete		
Proper O & M	(List the effort and the dates of the efforts to maintain proper O&M)  No leaks or spills O&M maintained		
Quarterly Outfall Examinations	Complete		
	☑ Kept with SWPPP		
SWPPP	Complete		
	Routine Inspections	Complete	

Comprehensive Site Compliance Evaluations	Complete
	☑ Kept with SWPPP

Name and Title of Person Conducting the Audit:

Timothy Childers, General Manager

## Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure 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, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Printed name of responsible corporate officer or

Duly authorized representative who signed this document

01/26/2024 Date

01/26/2024 Date

Responsible corporate officer or Duly authorized representative