(Complete a separate form for each outfall you assess)

Fairbanks Intern	ational Airport		· · · · · · · · · · · · · · · · · · ·	K06AB76				
Name of Facility				ES Tracking No.				
1b	Substantially Id	dentical Outfall? $\square$ Yes, $oxtimes$ No		Enter Text				
Outfall Name			(If yes, lis	t other outfalls)				
Person(s)/Title(s)				Date	Time			
Collecting sample:	Elise Thomas	Env. Manager	Discharge Began	Enter Date	Enter Text			
concerning sample.	Name	Title	Sample Collected	Enter Date	Enter Text			
Examining sample:	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text			
	Name	Title						
	•			Forter Tour				
•	?? 🗆 Yes, 🗆 No. If Yes, identify quan			Enter Text				
· · · · · · · · · · · · · · · · · · ·	ge: 🗌 Rainfall, 🗌 Snowmelt, 🛭							
Previous Storm En	nded > 72 hours before Start o	f This Storm? $oxtimes$ Yes, $oxtimes$ No	D <sup>1</sup> , if No explain: Enter Te	rt				
Darameters								
Parameters:								
	Other, (describe): Enter Tex							
•	☐ Musty, ☐ Sewage, ☐ Sulfu	·	as (describe): Enter Text					
	ts, $\square$ Other, (describe): Enter Te							
Clarity: $\square$ Clear, $\square$	$\square$ Slightly Cloudy, $\square$ Cloudy, ${\mathbb I}$							
Floating Solids:	☐ No, ☐ Yes, (describe): Enter							
Settled Solids <sup>2</sup> :	☐ No, ☐ Yes, (describe): Enter	Text						
Suspended Solids:	□ No, □ Yes, (describe): Enter	Text						
Foam (gently shak	te sample): $\square$ No, $\square$ Yes, (descr	ribe): Enter Text						
Oil Sheen: $\ \square$ No	ne, $\square$ Flecks, $\square$ Globs, $\square$ She	een, $\square$ Slick, $\square$ Other (descr	ribe): Enter Text					
Other Obvious Ind	licators of Stormwater Pollutic	n: No, Yes, (describe)	: Enter Text					
Datail any concern	no additional commonte dae	aviations of pistures taken	and any samestive a	ations taken	halaw			
(attach additional sheets	ns, additional comments, des	criptions of pictures taken,	, and any corrective a	ctions taken	below			
NO DISCHARGE	aseeessa.							
		7						
Description: Click or	tap here to enter text.	Description: Clic	ck or tap here to enter	text.				

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)

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 gathered and evaluated 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.

Elise Thomas	Environmental Manager			
Name	Title			
6 lin thomas	July 13, 2022			
Signature	Date Signed			

(Complete a separate form for each outfall you assess)

Fairbanks Internat	tional Airport		A	K06AB76		
Name of Facility			APDES Tracking No.			
3b	Substantially Id	dentical Outfall? 🗵 Yes, 🗌 No		3a, 3c, 3d, 3e		
Outfall Name			(If yes, lis	t other outfalls)		
Person(s)/Title(s)				Date	Time	
6 II .: I	Elise Thomas	Env. Manager	Discharge Began	Enter Date	Enter Text	
Collecting sample:	Name	Title	Sample Collected	Enter Date	Enter Text	
Evamining cample.	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text	
Examining sample:	Name	Title				
Substitute Sample?	$\square$ Yes, $\square$ No. If Yes, identify qua	arter/year when sample was originall	y scheduled to be collected):	Enter Text		
	e: 🗌 Rainfall, 🗀 Snowmelt, I			es		
_	led > 72 hours before Start o	_	_	r†		
Trevious Storm End	ca > 72 modrs before start o	7 mis storm: 🖂 res, 🗀 w	o, ii No explain. Effect Tex			
Parameters:						
	Other (december) Forter Te					
	Other, (describe): Enter Te					
· ·	] Musty, □ Sewage, □ Sulfu		as (describe): Enter Text			
	, $\square$ Other, (describe): Enter Te					
Clarity: $\square$ Clear, $\square$	Slightly Cloudy, $\square$ Cloudy,	$\square$ Opaque, $\square$ Other				
Floating Solids:	☐ No, ☐ Yes, (describe): Enter	Text				
Settled Solids <sup>2</sup> :	☐ No, ☐ Yes, (describe): Enter	Text				
Suspended Solids:	□ No, □ Yes, (describe): Enter	Text				
•	sample): ☐ No, ☐ Yes, (desc					
	e, $\square$ Flecks, $\square$ Globs, $\square$ Sh		rihe). Enter Text			
	cators of Stormwater Pollution					
Other Obvious maid	ators of Stormwater Foliation	on. — No, — res, (describe)	. LIILEI TEXL			
	s, additional comments, des	criptions of pictures taken	, and any corrective a	ctions taken	below	
(attach additional sheets as	s necessary).					
NO DISCHARGE						
Description: Click or t	ap here to enter text.	Description: Clic	ck or tap here to enter	text.		
	1					

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)

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 gathered and evaluated 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.

Elise Thomas	Environmental Manager		
Name	Title		
Chart Chones	July 13, 2022		
Signature	Date Signed		

(Complete a separate form for each outfall you assess)

Fairbanks Internation	onal Airport		<i></i>	K06AB76	
Name of Facility			APE	DES Tracking No.	
4a	Substantially	//f P.	4b		
Outfall Name			(If yes, lis	t other outfalls)	
Person(s)/Title(s)				Date	Time
Callastina samula.	Elise Thomas	Env. Manager	Discharge Began	7/13/2022	08:20
Collecting sample: —	Name	Title	Sample Collected	7/13/2022	08:20
Examining sample: —	Elise Thomas	Env. Manager	Sample Examined	7/13/2022	08:20
	Name	Title			
ubstitute Sample?	Yes, 🛛 No. If Yes, identify q	uarter/year when sample was originally so	cheduled to be collected):	Enter Text	
		, If rainfall: Rainfall Amount < 1		es	
•		of This Storm? $\boxtimes$ Yes, $\square$ No $^1$ ,	if No explain: Enter Tex	rt	
larity: ⊠ Clear, □ S loating Solids: ⊠	☐ Other, (describe): Enter T lightly Cloudy, ☐ Cloudy No, ☐ Yes, (describe): Ente No, ☐ Yes, (describe): Ente	r, □ Opaque, □ Other er Text			
	No, $\square$ Yes, (describe): Ente				
•	ample): $oxtimes$ No, $oxtimes$ Yes, (de				
	• •	heen, $\square$ Slick, $\square$ Other (describe	e): Enter Text		
		tion: 🗵 No, 🗆 Yes, (describe): E			
Detail any concerns, attach additional sheets as n Cloudy, light rain 56F		escriptions of pictures taken, a	and any corrective a	ctions taken	below
				N	

Description: Click or tap here to enter text.

Page 1 of 2

Description: Click or tap here to enter text.

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)
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 gathered and evaluated 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.

Name
Title

Signature

July 13, 2022

Date Signed

(Complete a separate form for each outfall you assess)

Fairbanks International Airport				AK06AB76		
Name of Facility				DES Tracking No.		
Outfall Name	Substantially	Identical Outfall? $oximes$ Yes, $oximes$ No		5b st other outfalls)		
Outraii Name			(II yes, IIs	t other outlans)		
Person(s)/Title(s)				Date	Time	
Callestin nananala.	Elise Thomas	Env. Manager	Discharge Began	7/13/2022	09:25	
Collecting sample: -	Name	Title	Sample Collected	7/13/2022	09:25	
Examining sample: _	Elise Thomas	Env. Manager	Sample Examined	7/13/2022	09:25	
Examining sample.	Name	Title				
Substitute Sample?	□ Vac × No If Vac identify au	narter/year when sample was originally	schodulad to be collected).	Enter Text		
	oxdot res, $oxdot$ No. If Yes, identity quite $oxdot$ : $oxdot$ Rainfall, $oxdot$ Snowmelt,		inch			
_		of This Storm? $\boxtimes$ Yes, $\square$ No				
T TCVIOUS SCOTTIL ETTA	,u > 72 110013 Delote 3ta. t	Ji illia atomii; 🖆 103, 🗀 110	, Il No explain. Effect 10.			
☐ Solvents, ☐ Other, (describe): Enter Text  Clarity: ☒ Clear, ☒ Slightly Cloudy, ☐ Cloudy, ☐ Opaque, ☐ Other  Floating Solids: ☒ No, ☐ Yes, (describe): Enter Text  Settled Solids²: ☒ No, ☐ Yes, (describe): Enter Text  Suspended Solids: ☒ No, ☐ Yes, (describe): Enter Text  Foam (gently shake sample): ☒ No, ☐ Yes, (describe): Enter Text  Oil Sheen: ☒ None, ☐ Flecks, ☐ Globs, ☐ Sheen, ☐ Slick, ☐ Other (describe): Enter Text  Other Obvious Indicators of Stormwater Pollution: ☒ No, ☐ Yes, (describe): Enter Text						
Detail any concerns, (attach additional sheets as Cloudy, light rain 56l	necessary).	scriptions of pictures taken,	and any corrective a	ctions taken	below	

Description: cloudy sample

Page 1 of 2

Description: Click or tap here to enter text.

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)

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 gathered and evaluated 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.

Elise Thomas	Environmental Manager
Name	Title
Chait Thomas	July 13, 2022
Signature	Date Signed

 $\overline{5a}$  Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks International Airport			AK06AB76		
Name of Facility			APE	DES Tracking No.	
5a Outfall Name	Substantially	Identical Outfall? ⊠ Yes, ☐ No	/If you lie	t other outfalls)	
Outian Name			(II yes, IIs	t other outrails)	
Person(s)/Title(s)				Date	Time
Callantina annula	Elise Thomas	Env. Manager	Discharge Began	7/13/2022	09:22
Collecting sample: -	Name	Title	Sample Collected	7/13/2022	09:22
Examining sample: _	Elise Thomas	Env. Manager	Sample Examined	7/13/2022	09:22
Examining sample.	Name	Title			
Cubatituta Camania 2	□ Vac ⊠ Na .rr.			Enter Text	
		uarter/year when sample was originally s			
=	Rainfall, ☐ Snowmelt,				
Previous Storm Ende	ed > 72 hours before Start	of This Storm? $oxtimes$ Yes, $oxtimes$ No $^{\scriptscriptstyle 1}$ ,	, if No explain: Enter Tex	t .	
Floating Solids:  Settled Solids <sup>2</sup> :  Suspended Solids:  Foam (gently shake solid Sheen:		er Text er Text er Text			
-		scriptions of pictures taken,	and any corrective a	ctions taken	below
(attach additional sheets as		pollution; collected OK sampl	la fram Eb		
Cloudy, light rain 501	-, 110 obvious illuicators of	poliution, collected OK sampl	ie iroiii 50		

Description: cloudy sample

Page 1 of 2

Description: Click or tap here to enter text.

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

 $<sup>^{\</sup>rm 2}$  Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)

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Elise Thomas	Environmental Manager
Name	Title
This thorse	July 13, 2022
Signature	Date Signed

(Complete a separate form for each outfall you assess)

Fairbanks International Airport				AK06AB76					
Name of Facility	·				APDES Tracking No.				
Outfall Name	Substantially	/ Identical Outfall?	?⊠ Yes, ⊔ N		6c, 6a (If yes, list other outfalls)				
Odtiali Naille				(ii yes,	list other outrails;				
Person(s)/Title(s)					Data	Time			
1 613011(3)/ 11616(3)	Elise Thomas	Env. Ma	anager		Date Enter	Enter			
	Elise Momas	2110.1010	and Ser	Discharge Begar	Date	Text			
Collecting sample:	Name	Titl	e		Enter	Enter			
				Sample Collected	Date	Text			
	Elise Thomas	Env. Ma	anager		Enter	Enter			
Examining sample:				Sample Examined	Date	Text			
	Name	Titl	е						
Substitute Sample?	$\square$ Yes, $\square$ No. If Yes, identify q	uarter/year when sam	nple was origina	lly scheduled to be collected):	Enter Text				
Nature of Discharge	$e$ : $\square$ Rainfall, $\square$ Snowmelt	t, If rainfall: Rainfa	all Amount	< 1 inc	hes				
Previous Storm End	ed > 72 hours before Start	of This Storm?	⊠ Yes, □ N	10 <sup>1</sup> , if No explain: Enter To	ext				
Parameters:									
·	Other, (describe): Enter T	ext							
	Musty, □ Sewage, □ Sul		Petroleum/	Gas (describe): Enter Te	xt				
	, □ Other, (describe): Enter T			(2000)					
	Slightly Cloudy, $\square$ Cloudy		Other						
•	□ No, □ Yes, (describe): Ente	• • •	Other						
-									
	No, Yes, (describe): Ente								
•	□ No, □ Yes, (describe): Ente								
	sample):  No,  Yes, (de								
	e, $\square$ Flecks, $\square$ Globs, $\square$ S								
Other Obvious India	cators of Stormwater Pollu	tion: $\square$ No, $\square$	Y <b>es</b> , (describe	e): Enter Text					
Detail any concerns	s, additional comments, de	escriptions of pi	ctures take	n, and any corrective	actions taken	below			
(attach additional sheets as	s necessary).								
NO DISCHARGE									
Description: Click or t	ap here to enter text.		Description: Cl	ick or tap here to ente	er text.				

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

 $<sup>^{\</sup>rm 2}$  Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)
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 gathered and evaluated 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.

Elise Thomas	Environmental Manager		
Name	Title		
Clint thomas	July 13, 2022		
Signature	Date Signed		

(Complete a separate form for each outfall you assess)

Fairbanks International Airport				AK06AB76					
Name of Facility					DES Tracking No.				
<b>7b</b>		Substantially Identical Outfall			lo	7a, 7c, 7d, 7e			
Outfall Name					(If yes, li	st other outfalls)			
Person(s)/Title	0/6\						_		
Person(s)/ Inti		e Thomas	Env. N	<b>1</b> anager			Date Enter	Time Enter	
	LIIS	ETHOMAS	LIIV. IV	lallagei	Disch	arge Began	Date	Text	
Collecting sam	ıple:	Name	Т	itle			Enter	Enter	
					Sampl	e Collected	Date	Text	
	Flis	e Thomas	Fnv. N	1anager			Enter	Enter	
Examining sam		e momas	2114.14	ianagei	Sampl	e Examined	Date	Text	
J	•	Name	Т	itle			Date	TCAC	
Substitute San	nnle? □ Yes □	☐ <b>No.</b> If Yes, identify qu	arter/vear when s	amnle was origina	lly scheduled to	he collected):	Enter Text		
		Ifall, $\square$ Snowmelt,			Enter Text	inch		_	
	_	nours before Start (		-					
	II Eliaca > 72 II	Sars scioic start	J. 11113 3t011111	103, 1	· · · · · · · · · · · · · · · · · · ·	III. LITTET TE	1.6		
Parameters:									
	ne. 🗆 Other. (	describe): Enter Te	xt						
		$\square$ Sewage, $\square$ Sulf		☐ Petroleum/	Gas (describe)	· Fnter Tex	t		
	•	r, (describe): Enter Te		_ retrolearly	Gus (describe)	. LITTET TEX			
	•	Cloudy, $\square$ Cloudy,		Other					
Floating Solids		Yes, (describe): Ente							
_									
Settled Solids <sup>2</sup>	•	Yes, (describe): Ente							
•		Yes, (describe): Ente							
	• •	□ No, □ Yes, (des				T			
		ks, 🗆 Globs, 🗆 Sh							
Other Obvious	s indicators of s	Stormwater Polluti	on: ⊔ No, L		e): Enter Tex	τ			
-		nal comments, de	scriptions of <b>p</b>	pictures take	n, and any	corrective a	actions taken	below	
	heets as necessary).								
NO DISCHARG	E								
-									
s · · · · Clia	k or tan hara t	o ontor toyt		D	ick or tan h	are to enter	r toyt		

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)

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possibility of fine and imprisonment for knowing violations.

Elise Thomas	Environmental Manager	
Name	Title	
6 link thorse	July 13, 2022	
Signature	Date Signed	

 $\overline{7}\overline{b}$  Page 2 of 2

	(Сотріе	te a separate Jorm Jor each outJaii you a	ssess)		
Fairbanks Interna	tional Airport		A	K06AB76	
Name of Facility			APE	APDES Tracking No.	
9b	Substantially	Substantially Identical Outfall? $oxtimes$ Yes, $oxtimes$ No		9a, 9c	
Outfall Name				t other outfalls)	
Person(s)/Title(s)				Date	Time
Collecting sample:	Elise Thomas	Env. Manager	Discharge Began	7/13/2022	09:10
Collecting sample:	Name	Title	Sample Collected	7/13/2022	09:10
Examining sample:	Elise Thomas	Env. Manager	Sample Examined	7/13/2022	09:10
Examining sample.	Name	Title			
•		uarter/year when sample was originally so	cheduled to be collected):	Enter Text	
~	e: $oxtimes$ Rainfall, $oxtimes$ Snowmelt,				
Previous Storm End	led > 72 hours before Start	of This Storm? $oxtimes$ Yes, $oxtimes$ No $^{ extsf{1}}$ ,	if No explain: Enter Tex	t	
Parameters:					
Color: 🛛 None, 🗆	Other, (describe): Enter Te	ext			
Odor: 🗌 None, 🗆	🛚 Musty, 🗆 Sewage, 🗀 Sulf	fur, 🗵 Sour, 🗆 Petroleum/Ga	S (describe): Enter Text		
☐ Solvents, ☐ Other, (describe): Enter Text					
Clarity: ☐ Clear, ☐	Slightly Cloudy, ⊠ Cloudy,	$\square$ Opaque, $\square$ Other			
	⋈ No, ☐ Yes, (describe): Ente				
Settled Solids <sup>2</sup> : $\boxtimes$ No, $\square$ Yes, (describe): Enter Text					
	No, ☐ Yes, (describe): Ente				
•		scribe): Foam is brown and clum	nps together		
	• • •	neen, $\square$ Slick, $\square$ Other (describe			
		ion: $\square$ No, $\square$ Yes, (describe): E			
Other Obvious man	cators of Stormwater Fonds	1011. — 140, — 163, (describe). I	Inter rext		
		scriptions of pictures taken, a	and any corrective a	ctions taken l	below
attach additional sheets a		asia idaal far misraarsanism	grouth Likely from	natural biolog	rical
Drop drains had similar foam. Hot days/low precip - ideal for microorganism growth. Likely from natural biological processes. Will keep an eye on these outfalls					
processes. will kee	p an eye on these outrails				
			NA ZAWA ZAWA		





<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Description: sample	Description: Foam at base of outfall

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)

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 gathered and evaluated 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.

Elise Thomas	Environmental Manager
Name Choit Thomas	Title
	July 13, 2022
Signature	Date Signed

(Complete a separate form for each outfall you assess)

Fairbanks International Airport			AK06AB76		
Name of Facility			APDES Tracking No.		
10 Outfall Name	Substantially Identical Outfall? $\square$ Yes, $\boxtimes$ No			ter Text	
Outraii Name			(ii yes, ii:	st other outfalls)	
Person(s)/Title(s)					<b>-</b>
reison(s)/ nice(s)	Elise Thomas	Env. Manager		Date Enter	Time Enter
	Liise Hiomas	Liiv. ivialiagei	Discharge Began	Date	Text
Collecting sample:	Name	Title		Enter	Enter
			Sample Collected	Date	Text
	Elise Thomas	Env. Manager		Enter	Enter
Examining sample:	Liise Momas	Liiv. ivialiagei	Sample Examined	Date	Text
	Name	Title		Date	TCAL
Substitute Sample?	$\square$ Yes, $\square$ No. If Yes, identify qua	arter/year when sample was originally	y scheduled to be collected):	Enter Text	
	$a: \square$ Rainfall, $\square$ Snowmelt,		inch	es	
Previous Storm End	ed > 72 hours before Start o	of This Storm? $\square$ Yes, $\square$ No	D <sup>1</sup> , if No explain: Enter Tex	xt	
		·			
Parameters:					
·	Other, (describe): Enter Te	xt			
	Musty, □ Sewage, □ Sulf		as (describe): Enter Tex	t	
	, □ Other, (describe): Enter Te		Sus (describe). Effect Tex		
	Slightly Cloudy, $\square$ Cloudy,				
•		• •			
-	No, Yes, (describe): Enter				
	No, Ves, (describe): Enter				
•	□ No, □ Yes, (describe): Enter				
	sample): $\square$ No, $\square$ Yes, (desc				
	e, $\square$ Flecks, $\square$ Globs, $\square$ Sh				
Other Obvious Indic	ators of Stormwater Polluti	on: $\square$ No, $\square$ Yes, (describe)	: Enter Text		
Detail any concerns	s, additional comments, des	criptions of pictures taken	. and any corrective a	ctions taken	below
(attach additional sheets as		, , , , , , , , , , , , , , , , , , ,	, ,		
NO DISCHARGE					
Description: Click or tap here to enter text.		Description: Clic	ck or tap here to enter	text.	

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)
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 gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly

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.

Elise Thomas	Environmental Manager
Name	Title
Clinto Chores	July 13, 2022
Signature	Date Signed

(Complete a separate form for each outfall you assess)

Fairbanks International Airport			<b>AK06AB76</b>		
Name of Facility			APDES Tracking No.		
11 Outfall Name	Substantially Identical Outfall? $\square$ Yes, $\boxtimes$ No			ter Text	
Outraii Name			(II yes, III	st other outfalls)	
Person(s)/Title(s)					<b>-</b>
reison(s)/ nice(s)	Elise Thomas	Env. Manager		Date Enter	Time Enter
	Liise Hiomas	Liiv. ivialiagei	Discharge Began	Date	Text
Collecting sample:	Name	Title		Enter	Enter
			Sample Collected	Date	Text
	Elise Thomas	Env. Manager		Enter	Enter
Examining sample:	Liise Hiomas	Liiv. Managei	Sample Examined	Date	Text
	Name	Title		Date	TCAL
Substitute Sample?	$\square$ Yes, $\square$ No. If Yes, identify qua	rter/year when sample was originally	scheduled to be collected):	Enter Text	
	e: 🗆 Rainfall, 🗆 Snowmelt,		nter Text inch	es	_
_	ed > 72 hours before Start o		1. if No explain: Enter Te	ĸt	
		,	, ,		
Parameters:					
·	Other, (describe): Enter Te	v†			
			as (describe): Entor Toxi	+	
	Musty, ☐ Sewage, ☐ Sulfu		as (describe). Efficer Text	L	
	, Other, (describe): Enter Te				
•	Slightly Cloudy, $\Box$ Cloudy,				
Floating Solids:	$\square$ No, $\square$ Yes, (describe): Enter	Text			
Settled Solids <sup>2</sup> :	$\square$ No, $\square$ Yes, (describe): Enter	Text			
Suspended Solids:	☐ No, ☐ Yes, (describe): Enter	Text			
Foam (gently shake	sample): ☐ No, ☐ Yes, (desc	ribe): Enter Text			
	e, $\square$ Flecks, $\square$ Globs, $\square$ Sh		be): Enter Text		
	ators of Stormwater Pollution				
_	s, additional comments, des	criptions of pictures taken,	and any corrective a	ictions taken	below
(attach additional sheets as NO DISCHARGE	s riecessary).				
NO DISCHAINGE					
Description: Click or tap here to enter text.		Description: Click	k or tap here to enter	text.	

<sup>&</sup>lt;sup>1</sup> The 72-hour interval can be waived when the previous storm did not yield a measurable discharge or if you are able to document (attach applicable documentation) that less than a 72-hour interval is representative of local storm events during the sampling period.

<sup>&</sup>lt;sup>2</sup> Observe for settled solids after allowing the sample to sit for approximately one-half hour.

(Complete a separate form for each outfall you assess)

Certification by Facility Responsible Official (Refer to MSGP Subpart 1.12 Appendix A for Signatory Requirements)

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 gathered and evaluated 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,

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.

Elise Thomas	Environmental Manager
Name	Title
Chait Thomas	July 13, 2022
Signature	Date Signed