(Complete a separate form for each outfall you assess)

Fairbanks International Airport			A	K06AB76		
Name of Facility			APD	DES Tracking No.		
1b	Substantially Id	Substantially Identical Outfall? 🖂 Yes, 🗌 No		1a		
Outfall Name			(If yes, lis	t other outfalls)		
Person(s)/Title(s)				Date	Time	
	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	10:25	
Collecting sample:	Name	Title	Sample Collected	Enter Date	Enter Text	
	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text	
Examining sample:	Name	Title				
	_					
Substitute Sample?	\Box Yes, $oxtimes$ No. If Yes, identify qua	rter/year when sample was originally so	cheduled to be collected):	Enter Text		
Nature of Discharge	: 🗆 Rainfall, 🛛 Snowmelt, I	f rainfall: Rainfall Amount	ter Text inch	es		
Previous Storm Ende	ed > 72 hours before Start o	f This Storm? 🛛 Yes, \Box $\overline{No^{\scriptscriptstyle 1}}$,	if No explain: Enter Tex	t		
Parameters:						
Color: 🗌 None, 🗌	Other, (describe): Enter Tex	(t				
•		r, 🗆 Sour, 🗆 Petroleum/Ga	s (describe): Enter Text			
	Other, (describe): Enter Tex		, , , , , , , , , , , , , , , , , , ,			
	Slightly Cloudy, \Box Cloudy, \Box					
•	□ No, □ Yes, (describe): Enter	• • •				
•	□ NO, □ Yes, (describe): Enter					
	, ,, ,					
•	□ No, □ Yes, (describe): Enter					
	sample): 🗌 No, 🗌 Yes, (desc					
Oil Sheen: 🗌 None, 🗆 Flecks, 🗆 Globs, 🗆 Sheen, 🗆 Slick, 🗆 Other (describe): Enter Text						
Other Obvious Indicators of Stormwater Pollution: \Box No, \Box Yes, (describe): Enter Text						
Detail any concerns	, additional comments, des	criptions of pictures taken, a	and any corrective a	ctions taken	below	

(attach additional sheets as necessary).

Description: Click or tap here to enter text.	Description: Click or tap here to enter text.

¹ 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.

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 N. Thomas

Name in thous

Signature

Environmental Manager

Title

10/4/2023 Enter Date

(Complete a separate form for each outfall you assess)

Fairbanks Internati	onal Airport		ŀ	AK06AB76	
Name of Facility			APE	DES Tracking No.	
3 a	Substantially Identical Outfall? \Box Yes, $oxtimes$ No			ter Text	
Outfall Name			(If yes, lis	st other outfalls)	
Person(s)/Title(s)				Date	Time
	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	10:19
Collecting sample: -	Name	Title	Sample Collected	Enter Date	Enter Text
Examining sample: _	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text
Examining sumple.	Name	Title			
-	Other, (describe): Enter Te		• () Enter Toy		
	Musty, 🗆 Sewage, 🗆 Sulfu	ır, 🗆 Sour, 🗆 Petroleum/Ga	S (describe): Enter Text	Ī	
	Slightly Cloudy, \Box Cloudy,				
] No, Ves, (describe): Enter				
Settled Solids ² : \Box No, \Box Yes, (describe): Enter Text					
Suspended Solids: 🗆	🛛 No, 🗆 Yes, (describe): Enter	Text			
Foam (gently shake s	ample): 🗆 No, 🗆 Yes, (desc	ribe): Enter Text			
Oil Sheen: 🛛 None	, \Box Flecks, \Box Globs, \Box Sh	een, 🗆 Slick, 🗆 Other (describe	e): Enter Text		
Other Obvious Indica	tors of Stormwater Pollution	on: 🗌 No, 🗌 Yes, (describe): E	Enter Text		
Dotail any concorne	additional comments dos	crintions of nictures taken	and any corrective a	ctions takon	holow

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).

		e			_
Description: Cl	ick or tap here to enter text.		Description: Cl	ick or tap here to enter text.	

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Elise N. Thomas

Name 1: to Thomas

Signature

Environmental Manager

Title

Enter Date 10/4/2023

(Complete a separate form for each outfall you assess)

En	es	Time 10:15 Enter Tex Enter Tex
(If yes, lis Discharge Began Sample Collected Sample Examined duled to be collected):	Date 10/4/2023 Enter Date Enter Date Enter Text	10:15 Enter Tex Enter Tex
Discharge Began Sample Collected Sample Examined duled to be collected): Text inch	Date 10/4/2023 Enter Date Enter Date Enter Text	10:15 Enter Tex Enter Tex
Sample Collected Sample Examined duled to be collected): Text inch	10/4/2023 Enter Date Enter Date Enter Text es	10:15 Enter Tex Enter Tex
Sample Collected Sample Examined duled to be collected): Text inch	Enter Date Enter Date Enter Text es	Enter Tex Enter Tex
Sample Examined duled to be collected): Text inch	Enter Date Enter Text es	Enter Tex
duled to be collected): Text inch	Enter Text	
Text inch	es	
Text inch	es	
lescribe): Enter Text	t	
Enter Text		
er Text		

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).

			-
Description: Click or tap here to enter text.	Description: C	lick or tap here to enter text.	

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Elise N. Thomas

Name tothome

Signature

Environmental Manager

Title

Enter Date 10/4/2023

(Complete a separate form for each outfall you assess)

Fairbanks International Airport			AK06AB76		
Name of Facility				DES Tracking No.	
5a	Substantially Identical Outfall? \Box Yes, $oxtimes$ No			ter Text	
Outfall Name			(If yes, lis	st other outfalls)	
Person(s)/Title(s)				Date	Time
Collecting complex	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	10:38
Collecting sample:	Name	Title	Sample Collected	Enter Date	Enter Text
Examining sample:	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text
Examining sample.	Name	Title			
Substitute Sample?		rter/year when sample was originally so	cheduled to be collected):	Enter Text	
•		f rainfall: Rainfall Amount En			
-		f This Storm? \Box Yes, \Box No ¹ ,			
			·		
Parameters:					
Color: 🗌 None, 🗆	Other, (describe): Enter Ter	ĸt			
Odor: 🗌 None, 🗌	Musty, 🗆 Sewage, 🗆 Sulfu	ır, 🗆 Sour, 🗆 Petroleum/Ga	S (describe): Enter Text	t	
□ Solvents	, 🗆 Other, (describe): Enter Te	xt			
Clarity: 🗆 Clear, 🗆	Slightly Cloudy, \Box Cloudy,	🗆 Opaque, 🗆 Other			
loating Solids:	□ No, □ Yes, (describe): Enter	Text			
Settled Solids ² :	🗆 No, 🗆 Yes, (describe): Enter	Text			
Suspended Solids:	🗆 No, 🗆 Yes, (describe): Enter	Text			
•	sample): 🗆 No, 🗆 Yes, (desc				
	• •	een, 🗆 Slick, 🗆 Other (describe	e): Enter Text		
		on: \Box No, \Box Yes, (describe):			
Detail any concerns	, additional comments, des	criptions of pictures taken, a	and any corrective a	ctions taken	below

(attach additional sheets as necessary).

Description: Click or tap here to enter text.	Description: Click or tap here to enter text.

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Elise N. Thomas

Name 15 Thomas

Signature

Environmental Manager

Title

Enter Date 10/4/2023

(Complete a separate form for each outfall you assess)

Fairbanks Internatio	onal Airport		ŀ	AK06AB76	
Name of Facility			APE	DES Tracking No.	
5b	Substantially Identical Outfall? 🗌 Yes, 🖂 No		En	ter Text	
Outfall Name			(If yes, lis	st other outfalls)	
Person(s)/Title(s)				Date	Time
	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	10:30
Collecting sample: —	Name	Title	Sample Collected	Enter Date	Enter Text
Examining sample:	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text
Examining sample.	Name	Title			
	Other, (describe): Enter Te	xt ur, 🗆 Sour, 🗆 Petroleum/Ga	(decusive): Entor Toy	-	
	□ Other, (describe): Enter Te		s (describe). Enter Text	-	
	lightly Cloudy, \Box Cloudy,				
	No, Ves, (describe): Enter				
-	No, Ves, (describe): Enter				
	No, Ves, (describe): Enter				
•	ample): 🗆 No, 🗆 Yes, (desc				
		een, 🗆 Slick, 🗆 Other (describe	e): Enter Text		
		on: 🗌 No, 🗌 Yes, (describe): E			
		crintions of nictures taken		stions taken	holow

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).

Description: Cli	ck or tap here to enter text.	Description: Cl	ick or tap here to enter text.	

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Elise N. Thomas

Name 10/man

Signature

Environmental Manager

Title

Enter Date 10/4/2023 Date Signed

5b

(Complete a separate form for each outfall you assess)

Fairbanks International Airport		ŀ	AK06AB76		
Name of Facility			APE	APDES Tracking No.	
6a	Substantially Identical Outfall? 🛛 Yes, \Box No		(6b, 6c	
Outfall Name			(If yes, lis	st other outfalls)	
Person(s)/Title(s)				Date	Time
Collecting complex	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	10:50
Collecting sample:	Name	Title	Sample Collected	Enter Date	Enter Text
Examining sample:	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text
Examining sample.	Name	Title			
Substitute Sample? Yes, No. If Yes, identify quarter/year when sample was originally scheduled to be collected): Enter Text Nature of Discharge: Rainfall, Snowmelt, If rainfall: Rainfall Amount Enter Text inches Previous Storm Ended > 72 hours before Start of This Storm? Yes, No ¹ , if No explain: Enter Text					
Odor: 🗌 None, 🗆	Other, (describe): Enter Text Musty, Sewage, Sulfur Other, (describe): Enter Tex	r, □ Sour, □ Petroleum/Ga t	S (describe): Enter Text	:	
•	Slightly Cloudy, Cloudy, C	• •			
•	No, Ves, (describe): Enter				
	No, Ves, (describe): Enter				
•	□ No, □ Yes, (describe): Enter □				
Foam (gently shake sample): No, Yes, (describe): Enter Text					
Oil Sheen: 🗌 None, 🗆 Flecks, 🗆 Globs, 🗆 Sheen, 🗆 Slick, 🗋 Other (describe): Enter Text					
Other Obvious Indic	ators of Stormwater Pollution	n: 🗌 No, 🗌 Yes, (describe): E	Enter Text		
Detail any concerns (attach additional sheets as No discharge.	, additional comments, desc necessary).	riptions of pictures taken, a	and any corrective a	ctions taken	below

Description: Click or tap here to enter text.	Description: Click or tap here to enter text.

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Elise N. Thomas

Name tothome

Signature

Environmental Manager

Title

Enter Date 10/4/2023

(Complete a separate form for each outfall you assess)

we take the take to the take						
Fairbanks Internat	ional Airport			AKO6AB76		
7d	Substantially Identical Outfall? 🛛 Yes, \Box No		APDES Tracking No. 7a, 7b, 7c, 7e			
Outfall Name				(If yes, list other outfalls)		
Person(s)/Title(s)				Date	Time	
Collecting complex	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	11:00	
Collecting sample: -	Name	Title	Sample Collected	Enter Date	Enter Text	
Examining sample: _	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text	
Examining sample.	Name	Title				
Substitute Sample?	\Box Yes, $oxtimes$ No. If Yes, identify qua	rter/year when sample was originally so	cheduled to be collected):	Enter Text		
Nature of Discharge	: 🗆 Rainfall, 🖂 Snowmelt, I	f rainfall: Rainfall Amount En	ter Text inch	es		
Previous Storm Ende	ed > 72 hours before Start o	f This Storm? \Box Yes, \Box No ¹ ,	if No explain: Enter Tex	(t		
Parameters:						
Color: 🗌 None, 🗌	Other, (describe): Enter Te>	<t of="" s<="" statement="" td="" the="" with=""><td></td><td></td><td></td></t>				
•		r, 🗆 Sour, 🗆 Petroleum/Ga	s (describe): Enter Text	t		
	Other, (describe): Enter Tex		- (
	Slightly Cloudy, Cloudy,					
•	□ No, □ Yes, (describe): Enter	• •				
•	No, Ves, (describe): Enter					
	NO, Ves, (describe): Enter					
•						
	sample): 🗌 No, 🗌 Yes, (desc					
		een, \Box Slick, \Box Other (describe				
Other Obvious Indica	ators of Stormwater Pollutic	on: \Box No, \Box Yes, (describe): E	Inter Text			
Detail any concerns, (attach additional sheets as No discharge.		criptions of pictures taken, a	and any corrective a	ctions taken	below	

Description: Click or tap here to enter text.	Description: Click or tap here to enter text.

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Elise N. Thomas

Name From

Signature

Environmental Manager

Title

Enter Date 10/4/2023

(Complete a separate form for each outfall you assess)

Fairbanks Internat	ional Airport		ŀ	AK06AB76	
Name of Facility			APDES Tracking No.		
9b	Substantially Identical Outfall? 🖂 Yes, 🗌 No		9a, 9c		
Outfall Name			(If yes, list other outfalls)		
Person(s)/Title(s)				Date	Time
Collecting sample:	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	11:12
collecting sample.	Name	Title	Sample Collected	Enter Date	Enter Text
Examining sample:	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text
Examining sample.	Name	Title			
Substitute Sample?	□ Yes, 凶 No. If Yes, identify quart	rter/year when sample was originally s	cheduled to be collected):	Enter Text	
Nature of Discharge	: \Box Rainfall, \boxtimes Snowmelt, I	f rainfall: Rainfall Amount En	iter Text inch	es	
Previous Storm End	ed > 72 hours before Start o	f This Storm? \Box Yes, \Box No ¹ ,	, if No explain: Enter Te>	ĸt	
Parameters:					
Color: 🗆 None, 🗆	Other, (describe): Enter Tex	<t st<="" td=""><th></th><td></td><td></td></t>			
Odor: 🗆 None, 🗆	Musty, 🗆 Sewage, 🗆 Sulfu	ır, 🗆 Sour, 🗆 Petroleum/Ga	S (describe): Enter Text	Ī	
□ Solvents.	Other, (describe): Enter Tex	xt			
-	Slightly Cloudy, Cloudy,				
•	\Box No, \Box Yes, (describe): Enter	• •			
•	□ No, □ Yes, (describe): Enter				
	□ NO, □ Yes, (describe): Enter				
•					
	sample): 🗌 No, 🗌 Yes, (desci				
		een, \Box Slick, \Box Other (describ			
Other Obvious Indic	ators of Stormwater Pollutic	on: \Box No, \Box Yes, (describe):	Enter Text		
Detail any concerns (attach additional sheets as No discharge.		criptions of pictures taken, a	and any corrective a	ctions taken	below

		1			
Description: Click or tap here to enter text.		Description: Cl	ick or tap here to enter text.		

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Elise N. Thomas

Name it thouse

Signature

Environmental Manager

Title

10/4/2023 Enter Date

(Complete a separate form for each outfall you assess)

Fairbanks Internati	onal Airport			AK06AB76	
Name of Facility				DES Tracking No.	
10	Substantially I	dentical Outfall? \Box Yes, $oxtimes$ No			
Outfall Name			(If yes, lis	st other outfalls)	
Person(s)/Title(s)				Date	Time
Collecting sample: -	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	11:05
collecting sample.	Name	Title	Sample Collected	Enter Date	Enter Text
Examining sample:	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text
Examine sumples	Name	Title			
Parameters:		of This Storm? 🗌 Yes, 🗌 Nc	, in No explain. Enter 167	ι.	
	Other, (describe): Enter Te	xt			
Odor: 🗌 None, 🗌	Musty, 🗆 Sewage, 🗆 Sulfu	ır, 🗆 Sour, 🗆 Petroleum/G	as (describe): Enter Text	t	
\Box Solvents,	Other, (describe): Enter Te	xt			
Clarity: 🗌 Clear, 🗌	Slightly Cloudy, \Box Cloudy,	🗆 Opaque, 🗆 Other			
Floating Solids:	🛛 No, 🗆 Yes, (describe): Enter	Text			
	🛛 No, 🗆 Yes, (describe): Enter				
Suspended Solids: 🗌	🛛 No, 🗆 Yes, (describe): Enter	Text			
Foam (gently shake s	sample): 🗌 No, 🗌 Yes, (des	ribe): Enter Text			
Oil Sheen: 🛛 None	, \Box Flecks, \Box Globs, \Box Sh	een, 🗆 Slick, 🗆 Other (descr	ibe): Enter Text		
Other Obvious Indica	ators of Stormwater Polluti	on: 🗌 No, 🗌 Yes, (describe):	Enter Text		
Detail any concerns	additional comments des	crintions of nictures taken	and any corrective a	ctions taken	below

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).

Description: Click or tap here to enter text.		Description: Cl	ick or tap here to enter text.		

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Elise N. Thomas

Name in thomas

Signature

Environmental Manager

Title

Enter Date 10/4/2023

(Complete a separate form for each outfall you assess)

Fairbanks Internat	ional Airport		ŀ	AK06AB76	
Name of Facility	of Facility		APDES Tracking No.		
11	Substantially l	dentical Outfall? 🗆 Yes, 🖂 No	Enter Text		
Outfall Name			(If yes, list other outfalls)		
Person(s)/Title(s)				Date	Time
Collecting complex	Elise N. Thomas	Env. Manager	Discharge Began	10/4/2023	10:08
Collecting sample:	Name	Title	Sample Collected	Enter Date	Enter Text
Examining sample:	Enter Text	Enter Text	Sample Examined	Enter Date	Enter Text
Examining sample.	Name	Title			
Parameters:	Other, (describe): Enter Te	f This Storm? ⊠ Yes, □ No¹,			
		ır, 🗆 Sour, 🗆 Petroleum/Ga	C (describe): Enter Text	÷	
	, 🗌 Other, (describe): Enter Te		3 (describe). Effet fext	L	
-	Slightly Cloudy, \Box Cloudy,				
	□ No, □ Yes, (describe): Enter				
Settled Solids ² :	🗆 No, 🗆 Yes, (describe): Enter	Text			
Suspended Solids:	🗆 No, 🗆 Yes, (describe): Enter	Text			
oam (gently shake	sample): 🗆 No, 🗆 Yes, (desc	ribe): Enter Text			
Dil Sheen: 🗌 None	e, 🗆 Flecks, 🗆 Globs, 🗆 Sh	een, 🗆 Slick, 🗆 Other (describ	e): Enter Text		
Other Obvious Indic	ators of Stormwater Pollution	on: 🗌 No, 🗌 Yes, (describe): 🛙	Enter Text		
Detail any concerns	additional comments. des	criptions of pictures taken, a	and any corrective a	ctions taken	below

Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).

Description: Click or tap here to enter text.		Description: Cl	ick or tap here to enter text.		

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Elise N. Thomas

Name tothome

Signature

Environmental Manager

Title

10/4/2023 Enter Date