(Complete a separate form for each outfall you assess)

<b>Fairbanks Internation</b>	nal Airport			AK06AB76	
Name of Facility		AP	DES Tracking No.		
1B	Substantially	Identical Outfall? $\boxtimes$ Yes, $\square$ No		1A	
Outfall Name		(If yes, li	st other outfalls)		
Davaga (a) /Title (a)					
Person(s)/Title(s)	tal a Maria	5. M	D: 1 D	Date	Time
	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text
Collecting sample:	Name	Title	Sample Collected	Enter	_
			'	Date	
	Jake Matter	Env. Manager	Sample Examined	Enter	_
Examining sample:				Date	
	Name	Title			
				Francis Tour	
•		uarter/year when sample was originally s		Enter Text	
Nature of Discharge:	$ riangledown$ Rainfall, $\square$ Snowmelt,	, If rainfall: Rainfall Amount 0.3	35 inch	ies	
<b>Previous Storm Ended</b>	> 72 hours before Start	of This Storm? $oximes$ Yes, $oximes$ No <sup>1</sup> ,	, if No explain: Enter Te	xt	
Parameters:					
Color: None. O	ther, (describe): Enter Te	ext			
		fur, 🗆 Sour, 🗆 Petroleum/Ga	S (describe): Enter Tex	t	
	Other, (describe): Enter To		describe). Effect Tex		
•	ightly Cloudy,  Cloudy,				
-	No, 🗌 Yes, (describe): Ente	er Text			
Settled Solids <sup>2</sup> : $\Box$	No, $\square$ Yes, (describe):				
Suspended Solids: 🗆 I	No, 🗌 Yes, (describe): Ente	er Text			
Foam (gently shake sai	mple): $\square$ No, $\square$ Yes, (des	scribe): Enter Text			
Oil Sheen:   None, [	☐ Flecks, ☐ Globs, ☐ Sl	neen, 🗆 Slick, 🗆 Other (describ	e): Enter Text		
		ion: No, Yes, (describe): [			
		escriptions of pictures taken, a	and any corrective a	actions take	n below
(attach additional sheets as neo	cessary).				
No discharge occuring					
			The second second		
	Section 1		Sold Water		
<b>44</b> 7					
	THE KANDAS A				
	A CHARLES			A SAN	
				13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

Description: 1B outlet

Q4 Outfall 1B Page 1 of 2

Description: 1B inlet

<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.

Jake Matter	Environmental Manager
Name	Title
Jacob Matter	9/9/25 Enter Date
Signature	Date Signed

Q4 Outfall 1B Page 2 of 2

(Complete a separate form for each outfall you assess)

Substitute Sample:   Jake Matter   Name   Jake Matter   Title   Sample Collecting sample:   Jake Matter   Name   Title   Env. Manager   Title   Sample Collected:   Sample Collected:   Sample Examining sample:   Jake Matter   Name   Title   Env. Manager   Discharge Began   9/5/2025   11:45-Sample Collected:   Sample Collected:   Sample Examining Sample:   Jake Matter   Name   Title   Substitute Sample Collected:   Sample Collected:   Sample Examined:   9/5/2025   12:15     Substitute Sample?   Yes,   No. If Yes, identify quarter/year when sample was originally scheduled to be collected:   Enter Text   Substitute Sample?   Yes,   No. If Yes, identify quarter/year when sample was originally scheduled to be collected:   Enter Text   Substitute Sample?   Yes,   No. If Yes, identify quarter/year when sample was originally scheduled to be collected:   Enter Text   Substitute Sample?   Yes,   No. If Yes, identify quarter/year when sample was originally scheduled to be collected:   Enter Text   Substitute Sample?   Yes,   No. If Yes, identify quarter/year when sample was originally scheduled to be collected:   Enter Text   Substitute Sample?   Enter Text   Substitute Sample Examined   Yes,   No. If Yes, identify quarter/year when sample was originally scheduled to be collected:   Enter Text   Substitute Sample   Yes,   Substitute Sample   Yes,   Substitute Sample   Yes,   No. If Yes,	Fairbanks International Airport			AK06AB76		
Person(s)/Title(s)  Collecting sample:    Name		Substantially Identical Outfall?   Yes,   No		5		
Person(s)/Title(s)  Collecting sample:						
Collecting sample:    Discharge Began   Sample Collected   Sample Collected   Sample Collected   Sample Examining sample:   Discharge Began   Sample Collected   Sample Examined   Sample Examin	Outian Name			(11 yes, 11:	st other outrails)	
Collecting sample:    Discharge Began   Sample Collected   Sample Collected   Sample Collected   Sample Examining sample:   Discharge Began   Sample Collected   Sample Examined   Sample Examin	Person(s)/Title(s)				Date	Time
Examining sample:    Jake Matter		Jake Matter	Env. Manager	Discharge Began		
Substitute Sample?	Collecting sample:	Name	Title	Sample Collected	9/5/2025	11:45-
Substitute Sample?	Examining sample:	Jake Matter	Env. Manager	Sample Examined	9/5/2025	12:15
Nature of Discharge:  Rainfall,  Snowmelt, If rainfall: Rainfall Amount  O.35 inches Previous Storm Ended > 72 hours before Start of This Storm?  Yes,  No¹, if No explain: Enter Text  Parameters: Color:  None,  Other, (describe): Enter Text Odor:  None,  Musty,  Sewage,  Sulfur,  Sour,  Petroleum/Gas (describe): Enter Text  Solvents,  Other, (describe): Enter Text  Clarity:  Clear,  Slightly Cloudy,  Cloudy,  Opaque,  Other Floating Solids:  No,  Yes, (describe): sediment grain Suspended Solids²:  No,  Yes, (describe): ener microscopic white fibers 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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).		Name	Title			
Nature of Discharge:  Rainfall,  Snowmelt, If rainfall: Rainfall Amount  O.35 inches Previous Storm Ended > 72 hours before Start of This Storm?  Yes,  No¹, if No explain: Enter Text  Parameters: Color:  None,  Other, (describe): Enter Text Odor:  None,  Musty,  Sewage,  Sulfur,  Sour,  Petroleum/Gas (describe): Enter Text  Solvents,  Other, (describe): Enter Text  Clarity:  Clear,  Slightly Cloudy,  Cloudy,  Opaque,  Other Floating Solids:  No,  Yes, (describe): sediment grain Suspended Solids²:  No,  Yes, (describe): ener microscopic white fibers 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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	Substitute Sample?	Voc. Moutive desir	and and an analysis of the state of the stat	ankanda landara kan an Handard V	Enter Tevt	+
Previous Storm Ended > 72 hours before Start of This Storm? ☐ Yes, ☒ No¹, if No explain: Enter Text  Parameters:  Color: ☒ None, ☐ Other, (describe): Enter Text  Odor: ☒ None, ☐ Musty, ☐ Sewage, ☐ Sulfur, ☐ Sour, ☐ Petroleum/Gas (describe): Enter Text  ☐ Solvents, ☐ Other, (describe): Enter Text  Clarity: ☒ Clear, ☐ Slightly Cloudy, ☐ Cloudy, ☐ Opaque, ☐ Other  Floating Solids: ☐ No, ☒ Yes, (describe): insect and seed pod flakes  Settled Solids²: ☐ No, ☒ Yes, (describe): sediment grain  Suspended Solids: ☐ No, ☒ Yes, (describe): near microscopic white fibers  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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	·					
Parameters:         Color:       None, □ Other, (describe): Enter Text         Odor:       None, □ Musty, □ Sewage, □ Sulfur, □ Sour, □ Petroleum/Gas (describe): Enter Text         □ Solvents, □ Other, (describe): Enter Text         Clarity:       Clear, □ Slightly Cloudy, □ Cloudy, □ Opaque, □ Other         Floating Solids:       □ No, □ Yes, (describe): insect and seed pod flakes         Settled Solids²:       □ No, □ Yes, (describe): sediment grain         Suspended Solids:       □ No, □ Yes, (describe): near microscopic white fibers         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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	_					
Color: None, Other, (describe): Enter Text Odor: None, Musty, Sewage, Sulfur, Sour, Petroleum/Gas (describe): Enter Text Solvents, Other, (describe): Enter Text Clarity: Clear, Slightly Cloudy, Cloudy, Opaque, Other Floating Solids: No, Yes, (describe): insect and seed pod flakes Settled Solids <sup>2</sup> : No, Yes, (describe): sediment grain Suspended Solids: No, Yes, (describe): near microscopic white fibers 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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	Previous Storin Ended	> 72 Hours before start	of this storm? $\square$ fes, $\boxtimes$ No	, if No explain. Efficer Tex	(L	
Color: None, Other, (describe): Enter Text Odor: None, Musty, Sewage, Sulfur, Sour, Petroleum/Gas (describe): Enter Text Solvents, Other, (describe): Enter Text Clarity: Clear, Slightly Cloudy, Cloudy, Opaque, Other Floating Solids: No, Yes, (describe): insect and seed pod flakes Settled Solids <sup>2</sup> : No, Yes, (describe): sediment grain Suspended Solids: No, Yes, (describe): near microscopic white fibers 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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	Parameters:					
Odor: None, Musty, Sewage, Sulfur, Sour, Petroleum/Gas (describe): Enter Text Solvents, Other, (describe): Enter Text  Clarity: Clear, Slightly Cloudy, Cloudy, Opaque, Other Floating Solids: No, Yes, (describe): insect and seed pod flakes  Settled Solids <sup>2</sup> : No, Yes, (describe): sediment grain  Suspended Solids: No, Yes, (describe): near microscopic white fibers  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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).		her (describe): Enter To	ovt			
□ Solvents, □ Other, (describe): Enter Text  Clarity: ☒ Clear, □ Slightly Cloudy, □ Cloudy, □ Opaque, □ Other  Floating Solids: □ No, ☒ Yes, (describe): insect and seed pod flakes  Settled Solids²: □ No, ☒ Yes, (describe): sediment grain  Suspended Solids: □ No, ☒ Yes, (describe): near microscopic white fibers  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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	·			as (doscribo): Enter Text	t .	
Clarity: Sclear, Slightly Cloudy, Cloudy, Opaque, Other Floating Solids: No, Yes, (describe): insect and seed pod flakes Settled Solids <sup>2</sup> : No, Yes, (describe): sediment grain Suspended Solids: No, Yes, (describe): near microscopic white fibers 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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).		•		as (describe). Effect Text	L .	
Floating Solids: No, Yes, (describe): insect and seed pod flakes  Settled Solids <sup>2</sup> : No, Yes, (describe): sediment grain  Suspended Solids: No, Yes, (describe): near microscopic white fibers  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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	•					
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Suspended Solids: ☐ No, ☐ Yes, (describe): near microscopic white fibers  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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	-		· ·			
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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).						
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, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).	•		•			
Other Obvious Indicators of Stormwater Pollution: $\boxtimes$ No, $\square$ Yes, (describe): Enter Text <b>Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below</b> (attach additional sheets as necessary).		•				
Detail any concerns, additional comments, descriptions of pictures taken, and any corrective actions taken below (attach additional sheets as necessary).						
(attach additional sheets as necessary).	Other Obvious Indicato	rs of Stormwater Pollut	ion: ⊠ No, □ Yes, (describe):	Enter Text		
Enter Text	- ·		scriptions of pictures taken,	and any corrective a	ictions taker	n below
	Enter Text					
					E ==	
		and the second				
	F				7	
	A Comment					

Description: 3a outlet

Q4 Outfall 3A Page 1 of 2

Description: 3a discharge

<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.

Jake Matter	Environmental Manager
Name	Title
<u>Jacob Matter</u> Signature	Enter Date 9/9/25
Signature	Date Signed

Q4 Outfall 3A Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks International Airport			AK06AB76		
Name of Facility		Substantially Identical Outfall? $\square$ Yes, $\boxtimes$ No		DES Tracking No.	
4B Outfall Name	Substantially			nter Text st other outfalls)	
Outian Name			(ii yes, ii	st other outrails)	
Person(s)/Title(s)				Date	Time
Callacting camples	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text
Collecting sample:	Name	Title	Sample Collected	9/5/2025	11:40
Examining sample:	Jake Matter	Env. Manager	Sample Examined	9/5/2025	12:10
	Name	Title			
Substitute Sample? □	Yes No If Yes identify a	uarter/year when sample was originally s	cheduled to be collected):	Enter Text	i i
		, If rainfall: Rainfall Amount 0			
		of This Storm? $\square$ Yes, $\boxtimes$ No <sup>1</sup>			
			,		
Clarity:	No, ⊠ Yes, (describe): sma No, ⊠ Yes, (describe): nea mple): ⊠ No, □ Yes, (de □ Flecks, □ Globs, □ Sl ors of Stormwater Pollut	o, □ Opaque, □ Other  Ill spider and flying insect  Ill stick and insect remains  In microscopic white fibers	Enter Text	actions take	n helow
(attach additional sheets as nec		escriptions of pictures taken, a	and any corrective a	ictions taken	i below

Description: 4B outfall

Q4 Outfall 4B Page 1 of 2

Description: 4B discharge

<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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Jake Matter	Environmental Manager
Name	Title
Jacob Watter	Enter Date 9/9/25
Signature	Date Signed

Q4 Outfall 4B Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks International Airport			AK06AB76			
Name of Facility				DES Tracking No.		
5A Outfall Name	Substantially	Substantially Identical Outfall? $\square$ Yes, $\boxtimes$ No $\_$		Enter Text (If yes, list other outfalls)		
Outraii Name			(II yes, II	st other outrails)		
Person(s)/Title(s)				Date	Time	
0 11	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text	
Collecting sample:	Name	Title	Sample Collected	9/5/2025	10:25	
Examining sample:	Jake Matter	Env. Manager	Sample Examined	9/5/2025	10:55	
Examining sample.	Name	Title				
Substitute Sample 7	Voc. M. No. 16 Voc. 14 cartife ou		-hdld-t hlltd).	Enter Text	t .	
•		arter/year when sample was originally s				
		If rainfall: Rainfall Amount 0.3				
Previous Storm Ended	> 72 nours before Start	of This Storm? $\square$ Yes, $\boxtimes$ No $^1$ ,	, if No explain: Efficer Tex	Χť		
D						
Parameters:	/ 1					
•	ther, (describe): Enter Te					
	•	fur, $\square$ Sour, $\square$ Petroleum/Ga	S (describe): Enter Tex	t		
	Other, (describe): Enter Te					
Clarity: $\boxtimes$ Clear, $\square$ Sli	ightly Cloudy, $\square$ Cloudy,	$\square$ Opaque, $\square$ Other				
Floating Solids: $\boxtimes$	No, 🗆 Yes, (describe): Ente	r Text				
Settled Solids <sup>2</sup> : ⊠ I	No, 🗌 Yes, (describe):					
Suspended Solids: 🔲 I	No, 🛛 Yes, (describe): near	ly microscopic what fibers				
Foam (gently shake sai	mple): 🗵 No, 🗌 Yes, (des	scribe): Enter Text				
Oil Sheen: None,	☐ Flecks, ☐ Globs, ☐ Sh	neen, 🗆 Slick, 🗆 Other (describ	e): Enter Text			
		ion: 🛛 No, 🗌 Yes, (describe): [				
					a bala	
(attach additional sheets as neo		scriptions of pictures taken,	and any corrective a	actions takei	n below	
Enter Text	,coodi y).					
Zircor rext						
	WWW. That Said			-		
7.00						
					No.	
					7	

Description: 5A outlet

Q4 Outfall 5A Page 1 of 2

Description: 5A discharge

<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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Jake Matter	Environmental Manager
Name	Title
Jacob Matter	Enter Date 9/9/25
Signature	Date Signed

Q4 Outfall 5A Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks Internat	ional Airport			AK06AB76	
Name of Facility			APDES Tracking No.		
5B Outfall Name	Substantially Id	Substantially Identical Outfall? $\square$ Yes, $\boxtimes$ No		ter Text st other outfalls)	
outian Name			(11 yes, 11	st other outlans,	
Person(s)/Title(s)				Date	Time
Callagting	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text
Collecting sample:	Name	Title	Sample Collected	9/5/2025	9:55
Examining sample:	Jake Matter	Env. Manager	Sample Examined	9/5/2025	10:25
	Name	Title			
Substitute Sample?	☐ Yes, ☒ No. If Yes, identify quan			Enter Text	
•			_		
_	e: 🗵 Rainfall, 🗌 Snowmelt, It				
Previous Storm End	ed > 72 hours before Start o	i iiiis stoiiii! 🖂 tes, 🗀 No-	, if No explain. Efficer 10)	((	
Parameters:					
	Other, (describe): Enter Tex	+			
	Musty, $\square$ Sewage, $\square$ Sulfu		As (describe): Enter Tevi		
	, □ Other, (describe): Enter Te		13 (describe). Effect Text	•	
	Slightly Cloudy, $\square$ Cloudy, [				
-	No, Yes, (describe): Enter				
	□ No, ⊠ Yes, (describe): a few		mm		
•	No, ☐ Yes, (describe): Enter				
	sample): No, Yes, (descri				
	e, $\square$ Flecks, $\square$ Globs, $\square$ She				
Other Obvious Indic	ators of Stormwater Pollution	$\square$ No, $\square$ Yes, (describe):	Enter Text		
<b>Detail any concerns</b> (attach additional sheets as Enter Text	s, additional comments, desc s necessary).	criptions of pictures taken,	and any corrective a	ctions taker	ı below
			Section of the sectio		

Description: 5B outlet

Q4 Outfall 5B Page 1 of 2

Description: 5B discharge

<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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Jake Matter	Environmental Manager
Name	Title
Jacob Matter	Enter Date 9/9/25
Signature	Date Signed

Q4 Outfall 5B Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks International Airport		AK06AB76			
Name of Facility				DES Tracking No.	
6A Outfall Name	Substantially	Substantially Identical Outfall? $oxines$ Yes, $oxines$ No $oxines$		6B, 6C st other outfalls)	
Outlan Name			(11 yes, 11	st other outrails,	
Person(s)/Title(s)				Date	Time
0.11	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text
Collecting sample:	Name	Title	Sample Collected	9/5/2025	3:50
Examining sample:	Jake Matter	Env. Manager	Sample Examined	9/5/2025	4:20
Examining sample.	Name	Title			
Cubatituta Campla?	Voc 🏻 No 157 - 11 115			Enter Text	
		arter/year when sample was originally s			
_		If rainfall: Rainfall Amount 0.3			
Previous Storm Ended	> 72 nours before Start	of This Storm? $\square$ Yes, $\boxtimes$ No $^1$ ,	, if No explain: Enter Tex	ΚÜ	
Davamatawa.					
Parameters:	blana (alanawilan). Eustan Ta				
	ther, (describe): Enter Te				
	•	fur, $\square$ Sour, $\square$ Petroleum/Ga	S (describe): Enter Tex	t	
•	Other, (describe): Enter To				
•	ghtly Cloudy, $\Box$ Cloudy,	• •			
	No, 🗵 Yes, (describe): a sm	all stick and other vegetation	like leaves and a se	ed	
Settled Solids <sup>2</sup> : $\boxtimes$ $\bowtie$	No, 🗆 Yes, (describe):				
Suspended Solids: 🗆 🗈	No, $oxtimes$ Yes, (describe): near	microscopic white fibers. Ver	ry similar to whats p	resent in oth	ner samples
Foam (gently shake sar	nple): 🗵 No, 🗌 Yes, (des	scribe): Enter Text			
Oil Sheen: ⊠ None, □	$\square$ Flecks, $\square$ Globs, $\square$ Sh	neen, 🗆 Slick, 🗆 Other (describ	e): Enter Text		
Other Obvious Indicato	ors of Stormwater Pollut	ion: 🗆 No, 🗆 Yes, (describe): 🛭	Enter Text		
Detail any concerns, a	dditional comments. de	scriptions of pictures taken, a	and any corrective a	ctions taker	n below
(attach additional sheets as nec		seriptions of protunes taken, t			
Enter Text					
TANK TO THE PARTY OF THE PARTY					
17.4				4-111	
<b>1</b>					
				1	

Description: 6A outlet

Q4 Outfall 6A Page 1 of 2

Description: 6A discharge

<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.

Jake Matter	Environmental Manager
Name	Title
Jacob Matter	Enter Date 9/9/25
Signature	Date Signed

Q4 Outfall 6A Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks Internat	tional Airport			AK06AB76		
Name of Facility				APDES Tracking No.		
7D Outfall Name	Substantially Id	dentical Outfall? $oximes$ Yes, $oximes$ No		7B,7C,7E		
Outraii Name		(if yes, iii	st other outfalls)			
Person(s)/Title(s)				Date	Time	
Callagting as well as	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text	
Collecting sample:	Name	Title	Sample Collected	9/5/2025	11:00	
Examining sample:	Jake Matter	Env. Manager	Sample Examined	9/5/2025	11:30	
27.0	Name	Title				
Substitute Sample?	☐ Yes, ☒ No. If Yes, identify qua	rter/year when sample was originally	scheduled to be collected):	Enter Text	i	
•	e: $oxtimes$ Rainfall, $oxtimes$ Snowmelt, I			-	·	
_	led > 72 hours before Start o					
Trevious storm End	ica - 72 nours scrove start s	· ····· = · · · · · · · · · · · · · · ·	) II NO EXPIGITIVE ETTECT TEX			
Parameters:						
	Other, (describe): Enter Tex	ĸt				
Odor: ⊠ None, □	] Musty, □ Sewage, □ Sulfu	ır, 🗆 Sour, 🗆 Petroleum/Ga	as (describe): Enter Text	t		
☐ Solvents	, □ Other, (describe): Enter Te	xt				
	Slightly Cloudy,  Cloudy,					
	⋈ No, □ Yes, (describe): Enter					
_	No, ☐ Yes, (describe):					
	□ No, □ Yes, (describe): near I	microsconic white fihers				
•	sample): $\boxtimes$ No, $\square$ Yes, (desc	·				
	e, $\square$ Flecks, $\square$ Globs, $\square$ She		on: Enter Text			
	cators of Stormwater Pollutic					
-	s, additional comments, des	criptions of pictures taken,	and any corrective a	ictions taker	າ below	
(attach additional sheets as Enter Text	s necessary).					
Enter Text						
			Val			
NO ASS						
				100		
				NAC I		
TO THE REAL PROPERTY OF THE PERTY OF THE PER			400			

Description: 7D outlet

Q4 Outfall 7D Page 1 of 2

Description: 7D discharge

<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.

Jake Matter	Environmental Manager
Name	Title
Jacob Watter	Enter Date 9/9/25
Signature Signature	Date Signed

Q4 Outfall 7D Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks International Airport		AK06AB76			
Name of Facility	·		APDES Tracking No.		
9A	Substantially lo	dentical Outfall? $oxtimes$ Yes, $oxtimes$ No	9B, 9C		
Outfall Name			(If yes, lis	st other outfalls)	
Dorson(s)/Title(s)					
Person(s)/Title(s)	lako Mattor	Env. Managor	Discharge Rogan	Date 9/5/2025	Time Enter Toyt
Callesting cample.	Jake Matter Name	Env. Manager Title	Discharge Began		Enter Text
Collecting sample:	Nume	Title	Sample Collected	Enter	-
	laka Mattar	Free Manager		Date	
Examining sample:	Jake Matter	Env. Manager	Sample Examined	Enter	-
Lamining sample.	Name	Title		Date	
	Nume	Hitc			
Substitute Sample?	☐ Yes ☒ No If Yes identify aux	rter/year when sample was originally so	cheduled to be collected):	Enter Text	
•		f rainfall: Rainfall Amount 0.3			
•	·	of This Storm? $\square$ Yes, $\boxtimes$ No <sup>1</sup> ,			
Previous Storin Enu	ed > 72 Hours before start o	$\square$ This storm: $\square$ Fes, $\square$ No-,	, if No explain. Efficer Tex	(L	
D					
Parameters:					
	Other, (describe): Enter Te				
Odor: $\boxtimes$ None, $\square$	Musty, 🗆 Sewage, 🗆 Sulft	ır, 🗆 Sour, 🗆 Petroleum/Ga	S (describe): Enter Text	t	
☐ Solvents	, $\square$ Other, (describe): Enter Te	xt			
Clarity: $\boxtimes$ Clear, $\square$	Slightly Cloudy, ☐ Cloudy,	$\square$ Opaque, $\square$ Other			
	No, ☐ Yes, (describe): Enter				
_	No, □ Yes, (describe):				
, , , , ,					
Suspended Solids: ⊠ No, □ Yes, (describe): Enter Text  Foam (gently shake sample): ⊠ No, □ Yes, (describe): Enter Text					
		een, 🗌 Slick, 🗌 Other (describe			
Other Obvious Indic	ators of Stormwater Pollution	on: $oxed{\boxtimes}$ No, $oxed{\square}$ Yes, (describe): $oxed{\mathbb{E}}$	Enter Text		
Detail any concerns	a. additional comments, des	criptions of pictures taken, a	and any corrective a	ctions taken	below
(attach additional sheets as		en produces cancer, c			
Discharge not occur	ring but sample of existing p	ouddle was clean with no sus	pended or settled so	olids and onl	ly floating
vegetateive matter					
N. Committee of the Com	2 1				
			A		
	7				
2			<b>大学</b>		
	**************************************				
			<b>生业</b> 、大学		

Description: 9A outlet

Q4 Outfall 9A Page 1 of 2

Description: 9A inlet

<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.

Jake Matter	Environmental Manager
Name	Title
Jacob Matter	Enter Date 9/9/25
<b>S</b> ignature	Date Signed

Q4 Outfall 9A Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks International Airport		AK06AB76				
Name of Facility		•		APDES Tracking No.		
10	Substantially I	Substantially Identical Outfall? $\square$ Yes, $\boxtimes$ No		Enter Text (If yes, list other outfalls)		
Outfall Name						
Person(s)/Title(s)				Date	Time	
, , , , , ,	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text	
Collecting sample:	Name	Title	Sample Collected	Enter Date	-	
Examining sample:	Jake Matter	Env. Manager	Sample Examined	Enter Date	-	
	Name	Title		Date		
•		arter/year when sample was originally so		Enter Text		
•	oxtimes Rainfall, $oxtimes$ Snowmelt,	<del></del>				
Previous Storm Ended	l > 72 hours before Start o	of This Storm? $\square$ Yes, $\boxtimes$ No $^1$ ,	if No explain: Enter Tex	ct .		
Dawa wa ata wa						
Parameters:	/					
	Other, (describe): Enter Te					
Odor: $\square$ None, $\square$ N	Austy, $\square$ Sewage, $\square$ Sulf	ur, 🗆 Sour, 🗆 Petroleum/Gas	S (describe): Enter Text	t		
☐ Solvents, ☐	Other, (describe): Enter Te	ext				
Clarity: $\square$ Clear, $\square$ S	lightly Cloudy, ☐ Cloudy,	$\square$ Opaque, $\square$ Other				
•	No, ☐ Yes, (describe): Ente					
-	No, ☐ Yes, (describe):					
	No, ☐ Yes, (describe): Ente	r Toyt				
·						
· - · · · ·	imple): $\square$ No, $\square$ Yes, (des					
		ieen, 🗌 Slick, 🗌 Other (describe				
Other Obvious Indicat	ors of Stormwater Polluti	on: $\square$ No, $\square$ Yes, (describe): $\square$	Inter Text			
Detail any concerns, a (attach additional sheets as no No discharge occuring	ecessary).	scriptions of pictures taken, a	and any corrective a	ctions taker	n below	

Description: 10 outlet

 $\overline{ t Q4 t Outfall t 10}$ 

Description: 10 inlet

<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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Jake Matter	Environmental Manager
Name	Title
Jacob Matter	Enter Date 9/9/25
Signature	Date Signed

Q4 Outfall 10 Page 2 of 2

(Complete a separate form for each outfall you assess)

Fairbanks International Airport		AK06AB76				
Name of Facility		Substantially Identical Outfall? ☐ Yes, ☒ No				
11	Substantially					
Outfall Name			(If yes, li	st other outfalls)		
Person(s)/Title(s)				Date	Time	
	Jake Matter	Env. Manager	Discharge Began	9/5/2025	Enter Text	
Collecting sample:	Name	Title	Sample Collected	Enter Date	-	
Examining sample:	Jake Matter	Env. Manager	Sample Examined	Enter Date	-	
	Name	Title		2 4 4 5		
				Fort and Taxat		
•		uarter/year when sample was originally so		Enter Text	<u> </u>	
•		If rainfall: Rainfall Amount 0.3				
Previous Storm Ended	> 72 hours before Start	of This Storm? $\square$ Yes, $\boxtimes$ No <sup>1</sup> ,	if No explain: Enter Tex	(t		
Darameters:						
Parameters:	than (doscriba): Entar To	ovt				
	ther, (describe): Enter Te		• / · · · · · · · · · · · · · · · · · ·			
	•	fur, $\square$ Sour, $\square$ Petroleum/Ga	S (describe): Enter Tex			
	Other, (describe): Enter To					
•	ightly Cloudy, ☐ Cloudy,	• •				
<u>-</u>	No,  Yes, (describe): Ente	er Text				
	No,  Yes, (describe):					
•	No, Yes, (describe): Ente					
· - · · ·	mple): $\square$ No, $\square$ Yes, (des					
Oil Sheen: $\square$ None,	$\square$ Flecks, $\square$ Globs, $\square$ Sh	neen, $\square$ Slick, $\square$ Other (describe	e): Enter Text			
Other Obvious Indicat	ors of Stormwater Pollut	ion: $\square$ No, $\square$ Yes, (describe): E	Inter Text			
Detail any concerns, a (attach additional sheets as ne No discharge occurring	cessary).	scriptions of pictures taken, a	and any corrective a	ctions taker	n below	

Description: 11 outlet

Q4 Outfall 11 Page 1 of 2

Description: 11 inlet

<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.

Jake Matter	Environmental Manager
Name	Title
Jacob Matter	9/9/25 Enter Date
<b>Ø</b> ignature	Date Signed

Q4 Outfall 11 Page 2 of 2