MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport	AK06AB76
Name of Facility	APDES Tracking No.

1B	Substantially Identical Outfall? ☒ Yes, ☐ No	1A
Outfall Name		(If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title		Date	Time
Collecting sample:	Jake Matter	Env. Manager	Discharge Began	6/24/2026	Enter Text
Examining sample:	Jake Matter	Env. Manager	Sample Collected	Enter Date	-
			Sample Examined	Enter Date	-

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☐ Yes, ☒ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

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): Enter Text

Settled Solids[2]: ☐ No, ☐ Yes, (describe):

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

No discharge occuring

Description: Outfall 1B outlet

Description: outfall 1b inlet

[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.

MSGP Quarterly Visual Assessment Form

(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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport — Name of Facility

AK06AB76 — APDES Tracking No.

3A — Outfall Name

Substantially Identical Outfall? ☐ Yes, ☒ No

Enter Text — (If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title
Collecting sample:	Jake Matter	Env. Manager
Examining sample:	Jake Matter	Env. Manager

	Date	Time
Discharge Began	6/24/2026	Enter Text
Sample Collected	6/24/2026	12:25
Sample Examined	6/24/2026	12:50

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☐ Yes, ☒ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

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): insects, vegetative matter, pollen

Settled Solids[2]: ☐ No, ☒ Yes, (describe): pollen, aquatic insect swimming

Suspended Solids: ☐ No, ☒ Yes, (describe): pollen

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).

Due to flow and wind direction area built up a large amount of pollen and cottonwood fluff, this coalesced into a film that looked like a sheen but was easily dispersed and did not coalesce afterwards which is not inidicative of POL contamination

Description: Outfall 3a outfall

Description: outfall 3 a sample

[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.

MSGP Quarterly Visual Assessment Form

(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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport — Name of Facility

AK06AB76 — APDES Tracking No.

4B — Outfall Name

Substantially Identical Outfall? ☐ Yes, ☒ No

Enter Text — (If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title
Collecting sample:	Jake Matter	Env. Manager
Examining sample:	Jake Matter	Env. Manager

	Date	Time
Discharge Began	6/24/2026	Enter Text
Sample Collected	6/24/2026	12:05
Sample Examined	6/24/2026	12:25-

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

Parameters:

Color: ☒ None, ☐ Other, (describe): s

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): Enter Text

Settled Solids[2]: ☒ No, ☐ Yes, (describe):

Suspended Solids: ☐ No, ☒ Yes, (describe): pollen

Foam (gently shake sample): ☐ No, ☐ Yes, (describe): Enter Text

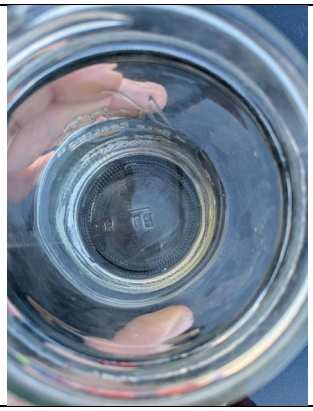
Oil Sheen: ☒ None, ☐ Flecks, ☐ Globs, ☐ Sheen, ☐ Slick, ☐ Other (describe): Enter Text

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).

Due to flow and wind direction area built up a large amount of pollen and cottonwood fluff, this coalesced into a film that looked like a sheen but was easily dispersed and did not coalesce afterwards which is not inidicative of POL contamination

Description: Outfall 4B outfall



Description: 4b sample

[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.

MSGP Quarterly Visual Assessment Form

(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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport	AK06AB76
Name of Facility	APDES Tracking No.

5A	Substantially Identical Outfall? ☐ Yes, ☒ No	Enter Text
Outfall Name		(If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title		Date	Time
Collecting sample:	Jake Matter	Env. Manager	Discharge Began	6/24/2026	Enter Text
Examining sample:	Jake Matter	Env. Manager	Sample Collected	6/24/2026	10:30-
			Sample Examined	6/24/2026	10:55

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

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): Dead bug

Settled Solids[2]: ☒ No, ☐ Yes, (describe):

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

Enter Text

	
Description: Outfall 5A outlet	Description: 5a discharge

[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.

MSGP Quarterly Visual Assessment Form

(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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport — Name of Facility

AK06AB76 — APDES Tracking No.

5B — Outfall Name

Substantially Identical Outfall? ☐ Yes, ☒ No

Enter Text — (If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title
Collecting sample:	Jake Matter	Env. Manager
Examining sample:	Jake Matter	Env. Manager

	Date	Time
Discharge Began	6/24/2026	Enter Text
Sample Collected	6/24/2026	10:55
Sample Examined	6/24/2026	11:20

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

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): Enter Text

Settled Solids[2]: ☒ No, ☐ Yes, (describe):

Suspended Solids: ☐ No, ☒ Yes, (describe): Single black particle possibly a seedhusk

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).

Enter Text

Description: Outfall 5B outlet

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.

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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport — Name of Facility

AK06AB76 — APDES Tracking No.

6B — Outfall Name

Substantially Identical Outfall? ☒ Yes, ☐ No — 6A, 6C (If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title
Collecting sample:	Jake Matter	Env. Manager
Examining sample:	Jake Matter	Env. Manager

	Date	Time
Discharge Began	6/24/2026	Enter Text
Sample Collected	Enter Date	-
Sample Examined	Enter Date	-

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours

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): Enter Text

Settled Solids[2]: ☐ No, ☐ Yes, (describe):

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

No discharge occuring

	
Description: Outfall 6B outlet	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.

MSGP Quarterly Visual Assessment Form

(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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport	AK06AB76
Name of Facility	APDES Tracking No.

7B	Substantially Identical Outfall? ☒ Yes, ☐ No	7A, 7C, 7D
Outfall Name		(If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title		Date	Time
Collecting sample:	Jake Matter	Env. Manager	Discharge Began	6/24/2026	Enter Text
Examining sample:	Jake Matter	Env. Manager	Sample Collected	Enter Date	-
			Sample Examined	Enter Date	-

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

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): Enter Text

Settled Solids[2]: ☐ No, ☐ Yes, (describe):

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

No discharge occuring

	
Description: Outfall 7B outlet	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.

MSGP Quarterly Visual Assessment Form

(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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport	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)

	Name	Title		Date	Time
Collecting sample:	Jake Matter	Env. Manager	Discharge Began	6/24/2026	Enter Text
Examining sample:	Jake Matter	Env. Manager	Sample Collected	6/24/2026	11:20-
			Sample Examined	6/24/2026	11:45-

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

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): Enter Text

Settled Solids[2]: ☐ No, ☒ Yes, (describe): 2-3 small(<1mm) chunks of vegetation/algae

Suspended Solids: ☐ No, ☒ Yes, (describe): barely visible white specs

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).

Enter Text

Description: Outfall 9B outlet

Description: outfall 9b discharge

[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.

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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport — Name of Facility

AK06AB76 — APDES Tracking No.

10 — Outfall Name

Substantially Identical Outfall? ☐ Yes, ☒ No

Enter Text — (If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title
Collecting sample:	Jake Matter	Env. Manager
Examining sample:	Jake Matter	Env. Manager

	Date	Time
Discharge Began	6/24/2026	Enter Text
Sample Collected	Enter Date	-
Sample Examined	Enter Date	-

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours

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): Enter Text

Settled Solids[2]: ☐ No, ☐ Yes, (describe):

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

No discharge occuring

Description: Outfall 10 outlet

Description: outfall 10 inlet

[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.

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 6/26/26
Signature	Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport	AK06AB76
Name of Facility	APDES Tracking No.

11	Substantially Identical Outfall? ☐ Yes, ☒ No	Enter Text
Outfall Name		(If yes, list other outfalls)

Person(s)/Title(s)

				Date	Time
Collecting sample:	Jake Matter (Name)	Env. Manager (Title)	Discharge Began	6/24/2026	Enter Text
			Sample Collected	Enter Date	-
Examining sample:	Jake Matter (Name)	Env. Manager (Title)	Sample Examined	Enter Date	-

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 0.51 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No[1], if No explain: current storm began the evening of 6/23 and ran through 6/24, sampling done at tail end of storm during normal working hours. No daily precipitation total exceeded 0.1" for 72 hours prior to storm

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): Enter Text

Settled Solids[2]: ☐ No, ☐ Yes, (describe):

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

No discharge occuring

	
Description: Outfall 11 outlet	Description: outfall 11 inlet

[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.

MSGP Quarterly Visual Assessment Form

(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 6/26/26
Signature	Date Signed