

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

Fairbanks International Airport

AK06AB76

Name of Facility

APDES Tracking No.

1A

Substantially Identical Outfall? ☒ Yes, ☐ No

1B

Outfall Name

(If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title	Discharge Began	Date	Time
Collecting sample:	Jake Matter	Env. Manager		8/3/2026	8:30 am
Examining sample:	Jake Matter	Env. Manager		8/3/2026	-
			Sample Collected		
			Sample Examined	-	-

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 0.14 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): Enter Text

Settled Solids²: ☐ No, ☐ Yes, (describe):

Suspended Solids: ☐ No, ☐ Yes, (describe): Enter Text

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

Oil Sheen: ☐ None, ☐ Flecks, ☐ Globbs, ☐ 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 occurring

	
Description: Outfall 1A outlet	Description: Outfall 1A 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.

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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

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

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.

3A

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	8/3/2026	8:30 am
			Sample Collected	8/3/2026	12:10
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/3/2026	12:35

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 .14 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): vegetative debris including pollen, leaves, branches, and algae

Settled Solids²: ☐ No, ☒ Yes, (describe): vegetative debris including pollen, leaves, branches, and algae

Suspended Solids: ☐ No, ☒ Yes, (describe): vegetative debris including pollen, leaves, branches, and algae

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

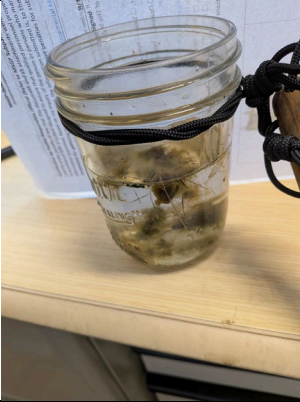
Oil Sheen: ☒ None, ☐ Flecks, ☐ Globs, ☐ Sheen, ☐ Slick, ☐ Other (describe): Enter Text

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).

Build up of vegiative matter at outlet is larger than previous years but no indications of contamination or pollution

	
Description: Outfall 3A outlet	Description: Outfall 3a 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.

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Jake Matter

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

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.

4B

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	8/3/2026	8:30am
			Sample Collected	8/3/2026	11:40
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/3/2026	12:05

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 0.14 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No¹, if No explain: Enter Text

Parameters:

Color: ☐ None, ☒ Other, (describe): Yellow and brown

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 Solids²: ☐ No, ☒ Yes, (describe): reddish organic material from deice basin

Suspended Solids: ☐ No, ☒ Yes, (describe): an abundance of near microscopic sediment

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

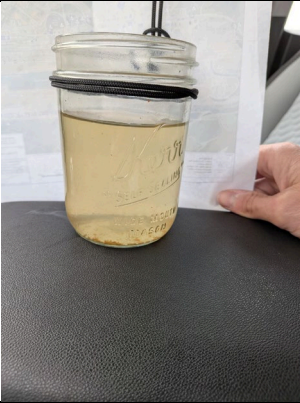
Oil Sheen: ☒ None, ☐ Flecks, ☐ Globs, ☐ Sheen, ☐ Slick, ☐ Other (describe): Enter Text

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).

Outfall smell and color due to connection with deice basin, basin contents were recently released to utility, drain format was changed to direct basin precipitation to stormwater system. This is the first storm weve had since it was drained so algae and other sediment that built up is now being caught in stormwater. Unlikely to have negative effects as the basin had been emptied of other potential contaminants

	
Description: Outfall 4B outlet	Description: Outfall 4B 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.

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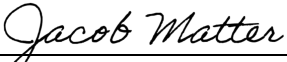
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage 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

Name

Environmental Manager

Title


Signature

Enter Date 8/7/26

Date Signed

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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	8/3/2026	8:30am
			Sample Collected	8/3/2026	Enter Text
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/8/2025	Enter Text

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 .14 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): Enter Text

Settled Solids²: ☒ No, ☐ Yes, (describe):

Suspended Solids: ☒ No, ☐ Yes, (describe): Enter Text

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

Oil Sheen: ☒ None, ☐ Flecks, ☐ Globbs, ☐ 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 occurring- water collecting in culvert but no movement

	
Description: Outfall 5A outlet	Description: Outfall 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.

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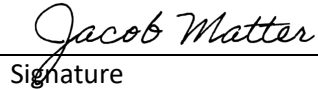
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage 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

Name

Environmental Manager

Title



Signature

Enter Date 8/7/26

Date Signed

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AK06AB76

Name of Facility

APDES Tracking No.

5B

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	8/3/2026	8:30am
			Sample Collected	8/3/2026	10:40
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/3/2026	11:05

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 .14 inches

Previous Storm Ended > 72 hours before Start of This Storm? ☒ Yes, ☐ No¹, if No explain: Enter Text

Parameters:

Color: ☐ None, ☒ Other, (describe): slight green yellow tannin tinge

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): what looks like pollen

Settled Solids²: ☐ No, ☒ Yes, (describe): light colored sediment approaching of varying sizes but all nearly microscopic

Suspended Solids: ☐ No, ☒ Yes, (describe): light colored sediment approaching of varying sizes but all nearly microscopic

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

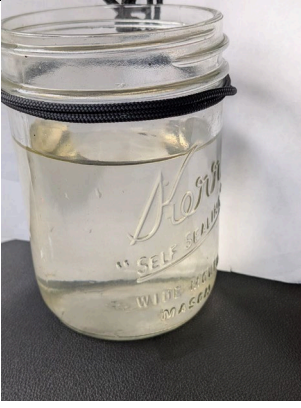
Oil Sheen: ☐ None, ☐ Flecks, ☐ Globs, ☐ Sheen, ☐ Slick, ☐ Other (describe): Enter Text

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: outfall 5b 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.

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Jake Matter

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

Date Signed

MSGP Quarterly Visual Assessment Form

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Fairbanks International Airport

AK06AB76

Name of Facility

APDES Tracking No.

6C

Substantially Identical Outfall? ☒ Yes, ☐ No

6A,6B

Outfall Name

(If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title		Date	Time
Collecting sample:	Jake Matter	Env. Manager	Discharge Began	8/3/2026	8:30am
			Sample Collected	8/3/2026	-
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/3/2026	-

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 .14 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): Enter Text

Settled Solids²: ☐ 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 occurring

			
Description: Outfall 6C outlet	Description:		

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.

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Jake Matter

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

Date Signed

MSGP Quarterly Visual Assessment Form

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Fairbanks International Airport

Name of Facility

7C

Outfall Name

Substantially Identical Outfall? ☒ Yes, ☐ No

AK06AB76

APDES Tracking No.

7A, 7B, 7D, 7E

(If yes, list other outfalls)

Person(s)/Title(s)

Collecting sample:

Jake Matter

Name

Env. Manager

Title

Discharge Began

Date

8/3/2026

Time

8:30am

Sample Collected

8/3/2026

-

Sample Examined

8/3/2026

-

Examining sample:

Jake Matter

Name

Env. Manager

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 .14 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): Enter Text

Settled Solids²: ☐ No, ☐ Yes, (describe):

Suspended Solids: ☐ No, ☐ Yes, (describe): Enter Text

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

Oil Sheen: ☐ None, ☐ Flecks, ☐ Globbs, ☐ 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 occurring



Description: Outfall 7C 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.

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Jake Matter

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

Date Signed

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8/3/26

AK06AB76

Name of Facility

APDES Tracking No.

9C

Substantially Identical Outfall? ☒ Yes, ☐ No

9A, 9B,

Outfall Name

(If yes, list other outfalls)

Person(s)/Title(s)

	Name	Title		Date	Time
Collecting sample:	Jake Matter	Env. Manager	Discharge Began	8/3/2026	8:30am
			Sample Collected	8/3/2026	-
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/3/2026	-

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 .14 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): Enter Text

Settled Solids²: ☐ No, ☐ Yes, (describe):

Suspended Solids: ☐ No, ☐ Yes, (describe): Enter Text

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

Oil Sheen: ☐ None, ☐ Flecks, ☐ Globbs, ☐ 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 occurring

	
Description: Outfall 9C outlet	Description: Outfall 9C 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.

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Jake Matter

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

Date Signed

MSGP Quarterly Visual Assessment Form

(Complete a separate form for each outfall you assess)

8/3/26 8

AK06AB76

Name of Facility

APDES Tracking No.

10

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	8/3/2026	8:30 am
			Sample Collected	8/3/2026	-
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/3/2026	-

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 .14 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): Enter Text

Settled Solids²: ☐ No, ☐ Yes, (describe):

Suspended Solids: ☐ No, ☐ Yes, (describe): Enter Text

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

Oil Sheen: ☐ None, ☐ Flecks, ☐ Globbs, ☐ 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 occurring

	
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.

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

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

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)

	Name	Title		Date	Time
Collecting sample:	Jake Matter	Env. Manager	Discharge Began	8/3/2026	8:30am
			Sample Collected	8/3/2026	-
Examining sample:	Jake Matter	Env. Manager	Sample Examined	8/3/2026	-

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 .14 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): Enter Text

Settled Solids²: ☐ No, ☐ Yes, (describe):

Suspended Solids: ☐ No, ☐ Yes, (describe): Enter Text

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

Oil Sheen: ☐ None, ☐ Flecks, ☐ Globbs, ☐ 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

Name

Environmental Manager

Title

Jacob Matter

Signature

Enter Date 8/7/26

Date Signed