

**VIRGINIA DEPARTMENT OF TRANSPORTATION
LOCATION AND DESIGN
STORMWATER POLLUTION PREVENTION PLAN (SWPPP)
CERTIFICATION**

This form is to be completed by the designated Responsible Land Disturber and submitted to the District or Central Office VPDES Permit Coordinator, as appropriate (see [IIM-LD 242](#) and [IIM-LD-246](#)). A copy of this form shall be maintained in the SWPPP document for the land disturbing activity.

DISTRICT _____ RESIDENCY _____
UPC NUMBER _____ VDOT PROJECT NUMBER _____
VPDES PERMIT REGISTRATION NUMBER _____

I certify that all information to be supplied by the contractor noted on the Stormwater Pollution Prevention Plan (SWPPP) General Information Sheets contained in the construction plan set (or other such documents) will be reviewed, approved and included with the other documents related to the SWPPP for this land disturbance activity prior to implementation of work in those areas identified by such information. I further certify that this document and all other documents related to the SWPPP, as identified on the SWPPP General Information Sheets, are maintained at the activity site, or at a location convenient to the activity site where no on-site facilities are available, and such documents will be made available for review upon request in accordance with the provisions of the General VPDES Permit for Discharges of Stormwater from Construction Activities (VAR10). Where the SWPPP documents are not stored on-site, a copy of such documents shall be in the possession of those with day to day operational control over the implementation of the SWPPP whenever they are on site.

The VDOT person responsible for the inspection of the erosion and sediment control and pollution prevention measures for this land disturbing activity is: _____, who is certified through the Virginia Department of Environmental Quality ESC and SWM Inspector Certification Program*.

Signature: _____

Printed Name: _____

Title: _____ Date: _____

* Individuals seeking SWM or ESC certification will be considered provisionally certified for [two years](#) from the date they complete their first required training course.