## **BMP Monthly Compliance**

State of Hawaii - Department of Transportation

	Contract No:	Island:	
	Charge Code:	District:	
	Demonstrate and Vern		
	Reporting Month and Year		
	Project Name		
	Project Address/Location		
	Permit No.	Project No	
	County/Island	Acreage Disturbed	
	Construction Start Date	Percent of Work Completed	
	This form must be completed within 2 working days of the end of the month and next business day when requested by DOH. In addition, this form is required to completion of the project.	d must be kept on-site and made available by the end o be submitted to DOH with the Notice of Cessation at the	f the
ì	BMP Deficiencies Found nd Associated Corrective ctions		
, ,	2. Discharges This Month		
	3. Other Major Incidents Reported to DOH This Month		

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 gather and evaluate 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.

Submitted By	Date		
Duly Authorized Person's Signature	Date		
Duly Authorized Person's Name:			
Duly Authorized Person's Position Title:			
Duly Authorized Person's Company or Agency Information:			
Address:			
Phone:			
Fax:			
Email:			