



Central Valley Regional Water Quality Control Board

Discharge Incident Report

(Notification of Discharge Incident for General Order for Nonpoint Source Discharge Activities Order Number R5-2024-0059)

This form must be completed in full and submitted in accordance with the requirements of the Monitoring and Reporting Program, Attachment B of Order No. R5-2024-0059

Federal Agency Information:

USFS Forest/Ranger District:

BLM Field Office:

Responsible Person(s) for Incident Follow up:

Name:

Title:

Address:

City:

State:

Zip Code:

Phone Number:

Email Address:

Identifying Party Name:

Title:

Phone Number:

Email:

General Information:

Date Incident was discovered:

Type of Waste:

Does the Discharge Incident meet the definition of a Controllable Sediment Discharge Source (CSDS). See below for CSDS conditions: Yes No

Controllable Sediment Discharge Source (CSDS) meets all of the following conditions:

- Causes or threatens to cause a discharge of sediment to surface waters in violation of applicable water quality standards,
- Was caused or affected by anthropogenic activity,
- Is it under the Permittee's ownership and/or control, and
- Can be treated through implementation of management measures (such as planned project, activities, routine maintenance, storm-proofing, emergency work, or as a stand-alone project)

If the above answer is **yes**: The Permittee must follow all applicable CSDS monitoring and reporting requirements.

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Was the Discharge Incident the result of an emergency activity: Yes No

Description of the Incident:

Estimated Volume and Concentration of Pollutants (if known):

Sediment Volume Loss Estimate:

Description of Corrective Actions Already Implemented:

Description of Planned Corrective Actions:

Anticipated Implementation Schedule:

Signature, Date, and Certification

I am aware that monitoring and technical reports submitted pursuant to Water Code § 13267 are submitted under penalty of perjury, and I certify that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete.

Name:

Title:

Signature: _____ **Date:**

Submittal Instructions

Submit the Discharge Incident report by email to the appropriate office within **14 days** of detection, or as soon as practicable if related to an emergency activity. An incomplete Discharge Incident Report may be returned to the Permittee for correction or additional information as determined by the Central Valley Water Board.

Rancho Cordova Office: centralvalleysacramento@waterboards.ca.gov

Redding Office: centralvalleyredding@waterboards.ca.gov

Fresno Office: centralvalleyfresno@waterboards.ca.gov

Please Attach the Following with this Report:

- Map showing location of discharge incident, proximity to water conveyance structures, and threatened/impacts receiving waters.
- Colored digital photographs of incident, general surroundings, proximity to water conveyance structures, and threatened/impacts receiving waters.