

TOWN OF WAYNESVILLE Stormwater Inspection Form

FOR OFFICE USE ONLY

Received by: _

Date received: _

Please use a separate form for each SCM on site

STORMWATER CONTROL MEASURE ANNUAL MAINTENANCE INSPECTION REPORT BIORETENTION CELL

Project Name:	Inspection Date:
Inspector Phone #:	Inspector Email:
Inspector Name:	Inspector Signature:
Recent Rainfall: □0-2 days □3-5 days □5+ days	□ Initial Inspection □ Follow-up Inspection

] Operations and Maintenance Agreement Recorded] Ú鄙c ¦^• 섞 糸@ ᇯ •] ^&c^åÂህÔT 続o^Ác森@ åẤţ 糸త Áţ ¦{ Á**ff Yei]f YXŁ**

Code Key:

N/A=Not ApplicableM=Monitor (potential for future problem)WN=Work NeededS=Satisfactory (or no maintenance needed at time of inspection)			
Potential Problem	Code	Comments	
Entire SCM			
Trash/debris is present			
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Perimeter of the Bioretention Cell			
Bare soil/erosive gullies			
Other (describe)			
Inlet Device: Pipe, Stone Verge, or Swale			
The pipe is clogged (if applicable)			
The pipe is cracked or otherwise damaged			
Erosion is occurring in the swale (if applicable)			
Stone verge is clogged or covered in sediment			
Other (describe)			
		1	
Pretreatment Area			
Sediment accumulation (greater than 3-inches)			
Erosion/gullies present			
Invasive vegetation			
Flow is bypassing pretreatment			
Other (describe)			
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Bioretention Cell: Vegetation			
Pruning needed for optimal plant health	<u> </u>		
Plants are dead, diseased, or dying			
Tree stakes/wires are present 6 months after planting			
Weeds are present			
Other (describe)			



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Potential Problem	Code	Comments
Bioretention Cell Mulch and Media		
Mulch is breaking down or floated away		
Soils/mulch clogged with sediment		
Other (describe)		
		-
Underdrain System (If Applicable)		
Clogging has occurred		
Other (describe)		
Outlet Control Structure		
Clogging has occurred		
Drop inlet is damaged		
Other (describe)		
Receiving Water		
Erosion or other signs of damage at the outlet		
Other (describe)		
Miscellaneous		
Access		
Vandalism		
Signage (if applicable)		

Additional Comments/Recommendations:

Other (describe)

Describe the maintenance/repair activities performed since the last inspection date (if no previous inspection, describe all maintenance performed). Examples: mowed the grass monthly, watered the plants weekly, picked up trash weekly, had the water quality unit cleaned with a vacuum truck on March 1, 2020, etc. Include current maintenance/repair activities or activities that need to be performed (e.g. the pervious concrete needs to be swept, the green roof needs to be weeded, etc):



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BIORETENTION CELL

Inspection Result (circle): Passed/Failed

If failed, reason for failure:

CERTIFICATION

l,	as a duly registered	in the State of North Carolina
attest that on, 20_	_, a thorough inspection of all required stormwate	r control facilities was performed.
All information provided i	is correct to the best of my knowledge.	

Inspector's Signature:_____

Title:_____

Seal (if applicable)

License/Certification Number: _____

Date: _____