



Sand Filter Operation and Maintenance Inspection Report Town of Mooresville, North Carolina

| | |
|---|---|
| Project Name: _____ | Inspection Date: _____ |
| Inspector Phone #: _____ | Inspector Email: _____ |
| Inspector Name: _____ | Inspector Signature: _____ |
| Recent Rainfall: <input type="checkbox"/> 0-2 days <input type="checkbox"/> 3-5 days <input type="checkbox"/> 5+ days | <input type="checkbox"/> Initial Inspection <input type="checkbox"/> Follow-up Inspection |

Aerial Photo of Site and Photographs of BMP Attached (Required)

Code Key:

| | |
|----------------------|---|
| N/A = Not Applicable | M = Monitor (potential for future problem) |
| WN = Work Needed | S = Satisfactory (or no maintenance needed at time of inspection) |

| Potential Problem | Code | Comments |
|--|------|----------|
| Entire BMP | | |
| Trash/debris is present | | |
| Adjacent Pavement (If Applicable) | | |
| Sediment is present on the pavement surface | | |
| Other (describe) | | |
| Perimeter of Sand Filter | | |
| Bare soil /erosive gullies | | |
| Vegetation is too short or long | | |
| Other (describe) | | |
| Flow Diversion Structure | | |
| Structure is clogged | | |
| Structure is damaged | | |
| Other (describe) | | |
| Forebay or Pretreatment Area | | |
| Sediment accumulation (greater than 6-inches) | | |
| Erosion has occurred | | |
| Weeds are present | | |
| Other (describe) | | |
| Filter Bed and Underdrain Collection System | | |
| Ponding water more than 24 hours after storm event | | |
| Other (describe) | | |



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| Potential Problem | Code | Comments |
|--|------|----------|
| Outlet Device | | |
| Device is clogged | | |
| Device is damaged | | |
| Receiving Water | | |
| Erosion or other signs of damage at the outlet | | |
| Other (describe) | | |
| Miscellaneous | | |
| Access | | |
| Vandalism | | |
| Signage (if applicable) | | |
| Other (describe) | | |

Additional Comments/Recommendations:

Please notify us when work is complete or if you have questions.



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1. Name of the land owner: _____

Address of the land owner: _____

2. Recorded book and page number of the lot for this structural SCM: Book _____ Page _____

3. The following repairs and maintenance are needed at this time: If no repairs or maintenance are needed at this time, insert N/A and move to item 4.



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4. Compliance Certification:

Please complete Section A or B as appropriate.

A. Certificate of Compliance

I do certify that I conducted an inspection of the SCM described herein. I certify that at the time of my inspection this SCM was performing properly and was in compliance with the terms and conditions of the approved maintenance agreement as required by the Town of Mooresville Phase II Post Construction and Illicit Discharge and Connection Ordinance.

Original signature and seal of the engineer, surveyor, or landscape architect.

| | | |
|---------------------|------|------|
| Signature and title | Date | Seal |
|---------------------|------|------|

B. Conditional Certificate of Compliance

I do certify that I conducted an inspection of the SCM described herein. I certify that at the time of my inspection this SCM was performing properly and was in compliance with the terms and conditions of the approved maintenance agreement as required by the Town of Mooresville Phase II Post Construction and Illicit Discharge and Connection Ordinance with the exception of the items listed in the above inspection sheet that require correction by the owner/permittee. I will inspect once the repairs are complete and submit a certified report.

Estimated Date of Compliance: _____

Original signature and seal of the engineer, surveyor, or landscape architect.

| | | |
|---------------------|------|------|
| Signature and title | Date | Seal |
|---------------------|------|------|