



Dry Extended Detention Basin 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

<input type="checkbox"/>	Aerial Photo of Site and Photographs of BMP Attached (Required)
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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		

Perimeter of the Dry Extended Detention Basin	Code	Comments
Bare soil/erosive gullies		
Other (describe)		

Inlet Device: Pipe or Swale	Code	Comments
The pipe is clogged (if applicable)		
The pipe is cracked or otherwise damaged		
Erosion is occurring in the swale (if applicable)		
Other (describe)		

Forebay	Code	Comments
Sediment accumulation (75% of the original depth)		
Erosion has occurred or riprap is displaced		
Invasive vegetation		
Other (describe)		

Main Treatment Area	Code	Comments
Sediment accumulation (75% of the original depth)		
Standing water more than 5 days after storm event		
Invasive vegetation		
Other (describe)		



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Potential Problem	Code	Comments
Embankment		
Shrubs/trees present		
Grass cover is unhealthy or eroding		
Signs of seepage on the downstream face		
Evidence of muskrat or beaver activity is present		
Needs repair (determined by appropriate professional)		
Other (describe)		
Outlet Device		
Clogging has occurred		
Device is damaged		
Debris on trash rack		
Other (describe)		
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 and/or the approved plans as required by the Watershed 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 and/or the approved plans as required by the Watershed 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