



## Grassed Swale Operation and Maintenance Inspection Report Town of Mooresville, North Carolina

|   |   |
|---|---|
| <u>Project Name:</u> _____  | <u>Inspection Date:</u> _____   |
| <u>Inspector Phone #:</u> _____   | <u>Inspector Email:</u> _____   |
| <u>Inspector Name:</u> _____  | <u>Inspector Signature:</u> _____   |
| 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"/> | <b>Aerial Photo of Site and Photographs of BMP Attached (Required)</b> |
|--------------------------|--|

**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 |
|---------------------------------------|------|----------|
| <b>Entire Length of Swale</b>         |      |          |
| Trash/debris is present               |      |          |
| Bare soil/erosive gullies             |      |          |
| Sediment covers grass at swale bottom |      |          |
| Vegetation is too short or long       |      |          |
| Other (describe)                      |      |          |

|  |  |  |
|--|--|--|
| <b>Receiving Water</b>                         |  |  |
| Erosion or other signs of damage at the outlet |  |  |
| Other (describe)                               |  |  |

|                         |  |  |
|-------------------------|--|--|
| <b>Miscellaneous</b>    |  |  |
| Access                  |  |  |
| Vandalism               |  |  |
| Signage (if applicable) |  |  |
| Other (describe)        |  |  |

**Additional Comments/Recommendations:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**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 |
|---------------------|------|------|