



Annual Inspection and Maintenance Reports for Stormwater Control Measures (SCMs)

COVER SHEET

Section 5.4.8 (c) of the Chapel Hill Land Use Management Ordinance requires that "All stormwater management facilities must be inspected by the responsible party, in accordance with the approved schedule in the stormwater operation and maintenance plan, to identify maintenance and repair needs, and to ensure compliance with the requirement of the recorded operation and maintenance plan."

GENERAL INFORMATION

Please use one Cover Sheet per site and one Inspection Report Form for each SCM on the site. Please include captioned color photographs of each main component of the SCM at the end of the Inspection Report Form.

SITE		INSPECTOR	
Site / Owner Name:		Inspector Name:	
Site Street Address:		Company Name:	
Site PIN:		Mailing Address:	
Owner Mailing Address:			
Phone Number:		Phone Number:	
Owner Email Address:		Email Address:	

INSPECTION REPORT FORMS

Indicate the quantity of each SCM on the site in the table below. Please use one form for each SCM and submit all forms together with photographs as a single PDF report with this Cover Sheet as the first page.

SCM	QUANTITY	SCM	QUANTITY
Bioretention Cell		Permeable Pavement	
Constructed Wetlands		Sand Filter	
Dry Pond		StormFilter	
Grassed Swale		Underground Detention	
Hydrodynamic Separator		Wet Pond	
Level Spreader		Other (Describe)	

INSPECTION RESULTS

Please note all required maintenance or repairs on the individual inspection forms. A re-inspection and certification must be completed within 60 days of failed report date. It is highly recommended that the inspector be part of the repair process in order to ensure that repairs are being performed promptly and properly.

PASS *The certifying professional must sign and seal below.*

FAIL *If any of the components of the SCM Inspection is coded FAIL, the entire SCM and the entire site fails inspection.*

MAINTENANCE RECORDS

Please attach records of routine SCM maintenance since the last inspection and maintenance report submittal to the Town. *Routine maintenance is required for each SCM per Town ordinance and per the recorded maintenance covenants.*

Are records available?

YES *(Attach to PDF)* **NO** *If not available, please provide a brief explanation:* _____

PROFESSIONAL CERTIFICATION

Certification shall be provided by a registered North Carolina Professional Engineer or Landscape Architect with qualified professional Stormwater Control Management (SCM) Inspection and Maintenance training.

I, _____, as a duly registered _____ in the State of North Carolina, attest that I have performed a thorough inspection for all SCMs associated with this site. I further attest that all SCMs (please circle appropriate response) **are** or **are not** performing as designed and in compliance with the Town of Chapel Hill ordinances and the terms and conditions of the recorded maintenance agreement.

(Seal)

Date: _____

Signature: _____

NCSU BMP Certification Number or list similar training credential:
