

Sand Filter Maintenance & Inspection Checklist/Report

[Note: a separate form must be used for each BMP]

Project Name: _____

Project Address: _____

Owner's Name: _____

Owner's Address: _____

Recorded Book and Page Number of the Lot: _____

BMP Name and Location: _____

Inspection Date: _____

Inspector: _____

Inspector Address/Phone Number: _____

Date Last Inspected: _____

Maintenance Item	Satisfactory	Unsatisfactory	Inspection Frequency	Comments/Actions Required
1. Debris Clean out				
Clear of trash and debris	<input type="checkbox"/>	<input type="checkbox"/>	M	
2. Street Sweeping				
Parking lot street sweeping	<input type="checkbox"/>	<input type="checkbox"/>	Q	
3. Erosion				
Evidence of soil erosion around contributing areas	<input type="checkbox"/>	<input type="checkbox"/>	M	
4. Sediment Chamber				
Sediment level in chamber (pump yearly or when 50% full)	<input type="checkbox"/>	<input type="checkbox"/>	M	
5. Outlet/Inlet				
Condition of outlet	<input type="checkbox"/>	<input type="checkbox"/>	M	
Condition of inlets and grates	<input type="checkbox"/>	<input type="checkbox"/>	M	
6. Dewatering				
Evidence of filter clogging	<input type="checkbox"/>	<input type="checkbox"/>	M	
7. Sand Media				
Condition of media (skim annually, replace as necessary)	<input type="checkbox"/>	<input type="checkbox"/>	M	
8. Mechanical Devices				
Inspection of all valves, etc.	<input type="checkbox"/>	<input type="checkbox"/>	Y	
9. Structural Integrity				
Evidence of structural damage (leaks, cracks, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	Y	
10. Overall Functionally				
Evidence of odors	<input type="checkbox"/>	<input type="checkbox"/>	M	
Evidence of bypass	<input type="checkbox"/>	<input type="checkbox"/>	M	

7. Miscellaneous				

W=Weekly, M=Monthly, Q=Quarterly, Y=Yearly

If applicable: Attach to this form documentation of BMP maintenance escrow account activity. This may be provided in the form of a bank statement which includes the current balance, as well as deposits and withdraws for the previous 12 months.

Maintenance Actions Taken: [If any of the above items were marked “U” for unsatisfactory, explain the actions taken and time table for correction. Attach additional pages as necessary.]

Additional Comments:

I do hereby certify that I conducted an inspection of the BMP described herein. I further certify that at the time of my inspection said BMP was performing properly and in compliance with the terms and conditions of the approved maintenance agreement required by the Phase II Post-Construction Storm Water Ordinance.

Certification:

Inspectors Signature

Date

(Seal)

Note: An annual inspection of each BMP must be performed by a qualified professional in accordance with the City of Hickory’s Phase II Stormwater Ordinance. All such inspections shall be documented and submitted on this form. The annual inspection shall occur before the first and each subsequent anniversary of the as-built certification. The inspection report for each BMP shall be submitted on/or before the anniversary date to the City of Hickory’s Engineering Department at 76 North Center Street, or mailed to the City’s Engineering Department at PO Box 398, Hickory, NC, 28603.