**SCM Annual Maintenance Inspection and Report Cover Sheet**

# UDO Chapter 9.4 Stormwater Management

H.1.a ***Function of BMP/SCMs -*** The owner of each engineered stormwater control installed pursuant to this article shall maintain and operate it so as to preserve and continue its function in controlling stormwater quality and quantity at the degree or amount of function for which the engineered stormwater control was designed.

H.1.b.i ***Qualified Individuals -*** The person responsible for maintenance of any engineered stormwater control installed pursuant to this article shall submit to the Stormwater Administrator an inspection report from one of the following persons performing services only in their area of competence: a qualified licensed North Carolina Professional Engineer or registered surveyor, landscape architect, or person certified by the North Carolina Cooperative Extension Service for stormwater SCM inspection and maintenance.

NOTE: If SCM deficiencies are identified, prescriptive remedies must come from the professional in their respective area of expertise. Any structural deficiencies must be inspected and assessed by a qualified licensed North Carolina Professional Engineer.

H.1.b.ii ***Approved Forms & Inspection Frequency -*** All inspection reports shall be on forms supplied by the Stormwater Administrator. An original inspection report shall be provided to the Stormwater Administrator beginning one year from the date of as-built certification and each year thereafter on or before the date of the as-built certification.

# A. GENERAL INFORMATION

Use only one Cover Sheet per site with as many specific structural SCM Inspection Report attachments as needed. Please attach digital photographs of the site and structural SCMs as applicable.

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Name:** | Click or tap here to enter text. | **Inspection Company:** | Click or tap here to enter text. |
| **Site Location/Address:** | Click or tap here to enter text. | **IC Mailing Address:** | Click or tap here to enter text. |
| **Legal Owner of Record:** | Click or tap here to enter text. |  |
| **Owner Mailing Address:** | Click or tap here to enter text. | **Inspector Name:** | Click or tap here to enter text. |
|  | **Inspector Phone #:** | Click or tap here to enter text. |
| **Site Contact Name:** | Click or tap here to enter text. | **Inspector email:** | Click or tap here to enter text. |
| **Site Contact email:** | Click or tap here to enter text. |  |  |
| **Alt Site Contact Name:** | Click or tap here to enter text. | **Inspection Date:** | Click or tap to enter a date. |
| **Alt Site Contact email:** | Click or tap here to enter text. | **Date of Last Rainfall:** | Click or tap to enter a date. |

# B. INSPECTION REPORT ATTACHMENTS

The listed attachments are the SCM Inspection Reports to be completed for this specific site. Please use one attachment per SCM and submit all forms with this Cover Sheet as a single PDF document. Please record the number of each SCM type found at this site in the space below. As an example, if a given site has four dry ponds and four level spreaders, you need to submit one Cover Sheet, along with four Dry Pond sheets and four Level Spreader sheets.

|  |  |  |
| --- | --- | --- |
|  |  | **Number of SCMs** (Fill-in the # below) |
| **Attachment A** | **Wet Detention Pond** | Choose an item. |
| **Attachment B** | **Bioretention Area** | Choose an item. |
| **Attachment C** | **Stormwater Wetlands** | Choose an item. |
| **Attachment D** | **Dry Detention Pond** | Choose an item. |
| **Attachment E** | **Grass Swale** | Choose an item. |
| **Attachment F** | **Sand Filter** | Choose an item. |
| **Attachment G** | **Level Spreader** | Choose an item. |
| **Attachment H** | **Hydrodynamic Separator** | Choose an item. |
| **Attachment I** | **Underground Detention** | Choose an item. |
| **Attachment J** | **Other:** Click or tap here to enter text. | Choose an item. |

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# C. RESULTS

|  |  |
| --- | --- |
|  | **NON-COMPLIANT**  VISUAL INSPECTION FOUND APPARENT ISSUES WHICH NEED IMMEDIATE ATTENTION. COMPLETE THE REPAIR ITEMS INDICATED ON THE ATTACHED CHECKLISTS WITHIN 90-DAYS OF THE DATE OF THIS REPORT. RE-INSPECTION AND CERTIFICATION PRIOR TO OR AT THE 90-DAY INTERVAL WILL FOLLOW SATISFACTORY COMPLETION OF ALL REPAIRS. REPORTS NOT RECEIVED WITHIN 90-DAYS WILL LEAD INTO ENFORCEMENT ACTIONS. SEE ITEM “D” BELOW REGARDING ENFORCEMENT. |
|  | **COMPLIANT WITH MAINTENANCE**  VISUAL INSPECTION FOUND MINOR DEFICIENCIES THAT NEED ATTENTION. COMPLETE THE MAINTENANCE ITEMS INDICATED ON THE ATTACHED CHECKLISTS WITHIN 90-DAYS OF THE DATE OF THIS REPORT. ONCE THE MAINTENANCE ITEMS HAVE BEEN COMPLETED THE TOWN SHALL BE NOTIFIED AND PROVIDED WITH PHOTOS OF THE COMPLETED MAINTENANCE. IF NOTIFICATION HAS NOT BEEN RECEIVED WITHIN 90-DAYS THIS WILL BE CONSIDERED A VIOLATION. SEE ITEM“D” BELOW. |
|  | **COMPLIANT**  VISUAL INSPECTION FOUND NO APPARENT ISSUES (SEE ITEM “E”).  **OR** CHECK HERE IF INITIAL INSPECTION WAS NON-COMPLIANT AND THIS IS A RE-INSPECTION. |

# D. NOTICE OF VIOLATION

Violations are triggered for the following reasons:

1. When an annual inspection is 30-days past due and no efforts have been documented (submitted) to the TOK indicating that the inspection has taken place; or
2. When a site inspection does take place and is non-compliant, and the follow-up 90-day repair window outlined above elapses and no repairs and/or follow-up certification is received by the TOK or we have not received request for an extension on repairs;
3. When a site inspection does take place but is complaint with maintenance and then, after 90-days, only some (but not all) of the maintenance issues have been rectified and notification to the town has not been received.

# E. CERTIFICATION

**Certification is performed when all SCMs are functional and Compliant:**

|  |  |  |
| --- | --- | --- |
| I, | Click or tap here to enter text. | as a duly registered Professional in the State of North Carolina, herby state that, to |
| to the best of my abilities the stormwater control measure (SCM) device(s) is/are fully functioning and operating as designed and intended. | | |

# F. SEAL/SIGNATURE

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NOTE: NCSU Certified Inspectors in lieu of seals must provide their NCSU certification number and expiration date.