

Private Natural Drainage Practices Maintenance Inspection

RAIN GARDENS/STORMWATER PLANTERS



Drainage System ID:		Basin:	
Inspected by:		Date & Time of this Inspection:	
Parcel Name:		Map:	
Address:			
Contact Name & Company:			
Contact's Address:		Contact's Phone:	
Contact's Email:		As-Built Plan Available Yes <input type="checkbox"/> No <input type="checkbox"/>	
Date of Last Inspection:		Does site need maintenance action? Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	
Weather at time of this inspection:		Does site need follow-up inspection upon completion of maintenance action? Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	
Amount of Rain Precipitation (inches) in last 48 hours (note source for information):			
1. Site Conditions/General			
Maintenance Manual and Maintenance log being maintained by Owner/Owner Rep?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Site's Impervious Areas (pavement, buildings, roads, driveways, walks) appear consistent with areas per original plan?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Areas draining to rain garden appear stabilized?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Sediment/garbage debris is not deposited in the rain garden?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Is there no evidence of erosion or rills & gullies formed over 2" deep?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
2. Observation Port(s)			
Number of Observation ports per as-built plan?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
If it has not rained for 48 hours, is ponding/stagnant water observed in rain garden?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
If it has not rained for 72 hours, has the water drained out of the observation port?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
If it was raining during site visit, is the distance between top of observation port and max. water level in port within minimum per design? See O&M for design max. water surface level in port.	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
3. Inlets & Drainage Structures			
Complete COB Inspection Checklist for storm drainage structures.			
4. Plants			
Is all soil covered by vegetation and/or mulch?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Are invasive plants/weeds under control?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Pruning/removal of dead or diseased plants being maintained?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Does watering appear adequate?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Do plants appear healthy?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Trash and debris under control?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Fertilizers/Herbicides/Pesticides not observed?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
If there is grass cover, is grass at least 4-inches tall within raingarden/bioretenion facility?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
5. Other observations:			
Stormwater Planter walls do not appear cracked or damaged?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Is there settlement observed?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Pests appear under control?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	If yes, what kind?	
If liner was used for stormwater planter, is there cover over the liner?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	
Other ?	Ok <input type="checkbox"/> Action Required <input type="checkbox"/>	Comment:	