

Bioretention Area Final Compliance Inspection
Town of Hope Mills, NC

Site Name: _____ Date: _____

Code Key
SF-Satisfactory, no problems noted
WN-Work needed
NF-Not functional
NA-Not applicable

Inlet

Item assessment	Code	Comments
Condition of pipe or swale		
Evidence of erosion		
Evidence of obstruction		
Other (describe)		

Forebay

Item assessment	Code	Comments
Sediment/debris accumulation		
Evidence of erosion		
Invasive vegetation		
Other (describe)		

Vegetation-attach written documentation by landscaper and/or contractor verifying planted vegetation meets design specifications

Item assessment	Code	Comments
Number and type of trees		
Number and type of shrubs		
Number and type of herbaceous species		
Type of mulch		
Type of grass		
Other (describe)		

Planting soil -attach soil test report

Item assessment	Code	Comments
Planting soil depth		
Percentage clay		
Percentage sand		
Percentage organic material		
Percentage silt		
Soil pH		

Main Treatment Area (Bioretention Cell)

Item assessment	Code	Comments
Side slopes sodded and no steeper than 3:1		
Overgrown vegetation		
Invasive/unwanted vegetation		
Plant condition/appearance		
Mulch condition/appearance		
Sediment accumulation		
Evidence of erosion		
Standing water-drawn down must be between 48-120 hours after storm event		
Other (describe)		

Perimeter/Side Slopes

Item assessment	Code	Comments
Debris/sediment accumulation		
Evidence of erosion		
Woody vegetation		
Banks/surrounding area mowed		
Other (describe)		

Outlet

Item assessment	Code	Comments
Condition of drop inlet		
Condition of pipe or swale		
Obstruction/clogging-debris/vegetation/etc.		
Evidence of erosion		
Condition of rip rap		
Condition of underdrains/cleanouts		
Other (describe)		

Miscellaneous

Item assessment	Code	Comments
Clear of trash and debris		
Adequate maintenance access		
Other (describe)		

Photographs

Attach digital photographs of the site and BMP features showing the condition of the site at time of inspection.

Additional Comments

[illegible]

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 in compliance with the approved stormwater management plans, designs, and the requirements of the Phase II Post-Construction Stormwater Article of the Stormwater Management Ordinance.

Certification:

Inspectors Signature

Date

(seal)