



# Chatham County Stormwater Inspection Form

FOR OFFICE USE ONLY	
Permit No.:	
Rec'd By:	
Date Rec'd:	

## STORMWATER CONTROL MEASURE ANNUAL MAINTENANCE INSPECTION REPORT PERMEABLE PAVEMENT

Project Name: _____	Inspection Date: _____
Inspector Phone #: _____	Inspector Email: _____
Inspector Name: _____	Inspector Signature: _____
Recent Rainfall: <input type="checkbox"/> 0-2 days <input type="checkbox"/> 3-5 days <input type="checkbox"/> 5+ days	<input type="checkbox"/> Initial Inspection <input type="checkbox"/> Follow-up Inspection

**Aerial Photo of Site and Photographs of SCM Attached (Required)**

**Code Key:**

N/A	=	Not Applicable	M	=	Monitor (potential for future problem)
WN	=	Work Needed	S	=	Satisfactory (or no maintenance needed at time of inspection)

Potential Problem	Code	Comments
<b>Entire SCM</b>		
Trash/debris is present		

Potential Problem	Code	Comments
<b>Perimeter of Permeable Pavement</b>		
Bare soil/erosive gullies		
Vegetated area drains toward pavement		
Other (describe)		

Surface of the Permeable Pavement	Code	Comments
Rutting/uneven settlement		
Trash/debris is present		
Weed growth		
Sediment is present on the surface		
Pavement is deteriorating or damaged		
Other (describe)		

Observation Well	Code	Comments
Water present more than 5 days after storm event		
Other (describe)		

Miscellaneous	Code	Comments
Access		
Vandalism		
Signage (if applicable)		
Other (describe)		

**Additional Comments/Recommendations:**

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**Original signature and seal of engineer or landscape architect. If inspector has received the Stormwater Inspection & Maintenance Certification from NC State University Cooperative Extension, provide certification number.**

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**Signature and title**

**Seal**

**Please notify the Chatham County Stormwater Administrator when repairs from this report have been completed.**