

Basin / Property Owner: ____

Storm Water Detention/ Retention Structures ◆ Inspection Checklist

If you have any questions regarding this checklist, please call Wake County Environmental Services at (919) 856-7400 to speak with an Environmental Consultant in your area.

ain Garc	len/Bioretention	Cistern			
Wet Detention Dry Detention		Other	Inspection	Inspection Date	
	- CI	ANNUAL INSPECTI		X 7	
		RCLE "YES" OR "NO" FOR		V	
A.		ervations, in compliance (no correct	ive measures needed*)	YES	NO
	Plants diseased-o		YES	NO	
	Runoff bypasses device			YES	NO
D.	Inlet/outlet visibly clogged			YES	NO
E.	Water present 5 days after storm			YES	NO
F.	Device removed or damaged (animal or human)			YES	NO
	Trash accumulation			YES	NO
	Noxious weeds present			YES	NO
I.	Exposed soil or soil erosion			YES	NO
J.	Odor present			YES	NO
K.				YES	NO
L.	Animal interference			YES	NO
	Trees present on dam Grass longer than 8" in height			YES	NO
	Cracks/sloughing observed on slopes/embankments			YES YES	NO NO
	R ITEMS AND ENTS:				
CORRE	ECTIVE MEASUI	RES* FOR ALL YES ANSWER	S ABOVE:		

THIS INSPECTION FORM MUST BE RETURNED TO THE FOLLOWING ADDRESS WITHIN 30 DAYS OF DUE DATE: