

**STORMWATER CONTROL STRUCTURE
DRY DETENTION MAINTENANCE AGREEMENT**

PROJECT: _____

RESPONSIBLE PARTY: _____ **PHONE #:** _____

ADDRESS: _____

I. Monthly

- a. Remove debris from trash rack.
- b. Check and clear orifice of any obstructions.
- c. Check pond side slopes; remove trash, repair eroded areas before next rainfall.

II. Quarterly

- a. Inspect the collection system (i.e., catch basin, piping, grassed swales) for proper functioning.
- b. Clear accumulated trash from basin grates, and basin bottoms, and check piping for obstructions.
- c. Check impoundment inlet pipes for undercutting. Repair if necessary.
- d. Repair any broken pipes.
- e. Replace rip rap that is choked with sediment.

III. Semi-Annually

- a. Remove accumulated sediment from bottom of outlet structure.
- b. Check pond depth at various locations. If depth is reduced to 75% of original design depth, remove sediment to original design depth.
- c. Reseed grassed swales twice yearly. Repair eroded areas immediately.

IV. General

- a. Mow side slopes according to the season. Maximum grass height to be six (6) inches.
- b. All components of impoundment system to be kept in good working order.
- c. In case the ownership of the Impoundment Transfers, the current owner shall, within thirty (30) days of transfer of ownership, notify the Wake County Environmental Services, Flood and Stormwater Section of such ownership transfer.
- d. This property and impoundment is also subject to the Operation and Maintenance Manual filed in relation to this property if one exists.
The maintenance of the stormwater device(s) shall be the sole responsibility of the Owner. The responsibility for the maintenance of the stormwater device shall pass in the chain of title to the Owner's successor in interest.

I, _____, hereby acknowledge that I am the financially responsible party for maintenance of this stormwater device. I will perform the maintenance as outlined above, as part of the Certificate of Compliance with Stormwater Regulations received for this project.

Signature: _____ Date: _____

I, _____, a Notary Public for the State of _____, County of _____, do hereby certify that _____ personally appeared before me this _____ day of _____, 2010 and acknowledge due execution of the foregoing instrument. Witness my hand and official seal,

Seal _____

My commission expires: _____