	STOR	MWATER M	MANAGEMENT	FACILITY MAINTEN	ANCE IN	SPECTION (CHECKLIST		
			Pervious	pavement with inf	filtratio	n bed			
			(M	IUNICIPAL USE ONL	.Y)				
LOCATION	·			BMP ID					
DA (AC.)				DATE INSTALLED					
,			TO BE CO	MPLETED BY BMP	OWNE	R			
			Weather Condition						
Date of Inspection:				(eg. Sunny, rainy, etc.)					
Inspector Na	ıme:			Owner Email:					
Current Owner:			Owner Phone Num						
			INSPE	ECTION RATING SYS	ТЕМ				
S= SATISFACTORY Y=YES			N/A = NOT APPLICABLE						
UN= UNSATI	SFACTO	RY	N=NO						
A. MAINTEN	NANCE A	CTIVITY						Y/N/NA	
Are leaves/debris removed from surface?									
Was a vacuu	Was a vacuum sweeper used at least twice a year to remove sediment and debris?								
Are weeds a	nd vege	tation grow	ing through pa	avement?					
B. GENERAL	CONDIT	IONS						S/UN	
Rate the ov	erall co	ndition of	the facility.						
C. ATTACH P	HOTOGE	RAPHS*							
condition inc * The BMP c	cluding b wner m	out not limit ay choose t	ted to overall	tormwater facility, to the view of basin, upstrate notos to permits@pine)	eam inl	ets, outlet s	tructures, etc	•	
D. REQUIRED	MAINT	ENANCE AC	TIVITIES						
Maintenance Frequency Mai			ntenance Activity		Completed (Y/N)	Action Needed (Y/N)			
Seasonally		Removed le	aves from surfa						
			now with a plast pove the surface face.						
As needed		stormwate	rvious paveme er is draining p um sweeper a debris.						
	<u></u>								

Inspected By:								
				(Signature)				
If different than BM	P Owner, pro	vide contact	information:					
Company Name:								
Address:								
Phone #								
Email:								
		Fo	r Municipal Use O	nly				
Date Received:				Receive	ed By:			
Corrective Actions								
Required:								