



Operation and Maintenance Inspection Report for Filtration Facility

(adapted from Watershed management Institute, Inc.)

Inspector Name _____
 Inspection Date _____
 Watershed _____
 As-Built Plans Available? _____

Project Location _____

Inspection Items	Checked? Yes/No	Maintenance Needed? Yes/No	Inspection Frequency	Comments
1 Debris removal				
Adjacent area clear of debris			M	
Inlets and outlets clear of debris			M	
Filtration Facility free of debris			M	
2 Vegetation				
Adjacent area stabilized			M	
Grass mowed			M	
Any evidence of erosion			M	
3 Oil and grease				
Any evidence of filter clogging			M	
4 Water retention where required				
Water holding chambers at normal pool			M	
No evidence of leakage			M	
5 Sediment Deposition				
Filtration chamber clean of sediments			A	
Water chambers not more than 1/2 full of sediments			A	
6 Structural Components				
Any evidence of structural deterioration			A	
Grates in good condition			A	
Any evidence of spalling or cracking of structural parts			A	
7 Oulets/overflow spillway				
Good condition (no need for repair)			A	
Any evidence of erosion			A	

Inspection Items	Checked? Yes/No	Maintenance Needed? Yes/No	Inspection Frequency	Comments
8 Overall Function of Facility Any evidence of flow bypassing facility Any noticeable odors outside of facility			A A	
9 Pump (where applicable) Catalog cuts and wiring diagram for pump available Waterproof conduits for wiring appear to be intact Panel box is well marked Any evidence of pump failure (excess water in pump well, etc.			A A A A	

Inspection Frequency Key A=Annual, M= Monthly

Necessary Action:

If any of the items above were answered Yes for "Maintenance Needed", a time frame needs to be established for repair or correction.

No action necessary. Continue routine inspections.
Correct noted facility deficiencies by (date) _____

Facility repairs were previously indicated and completed. Site reinspection is necessary to verify corrections and improvements.

Site reinspection completed on (date) _____

Site reinspection was satisfactory.
Next routine inspection is scheduled for approximately (date) _____

Inspectors Signature

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