

BIORETENTION INSPECTION FORM

Name(s) of Inspectors: _____

Date of Inspection: _____

Location of the bioretention facility: _____

Address or Intersection: _____

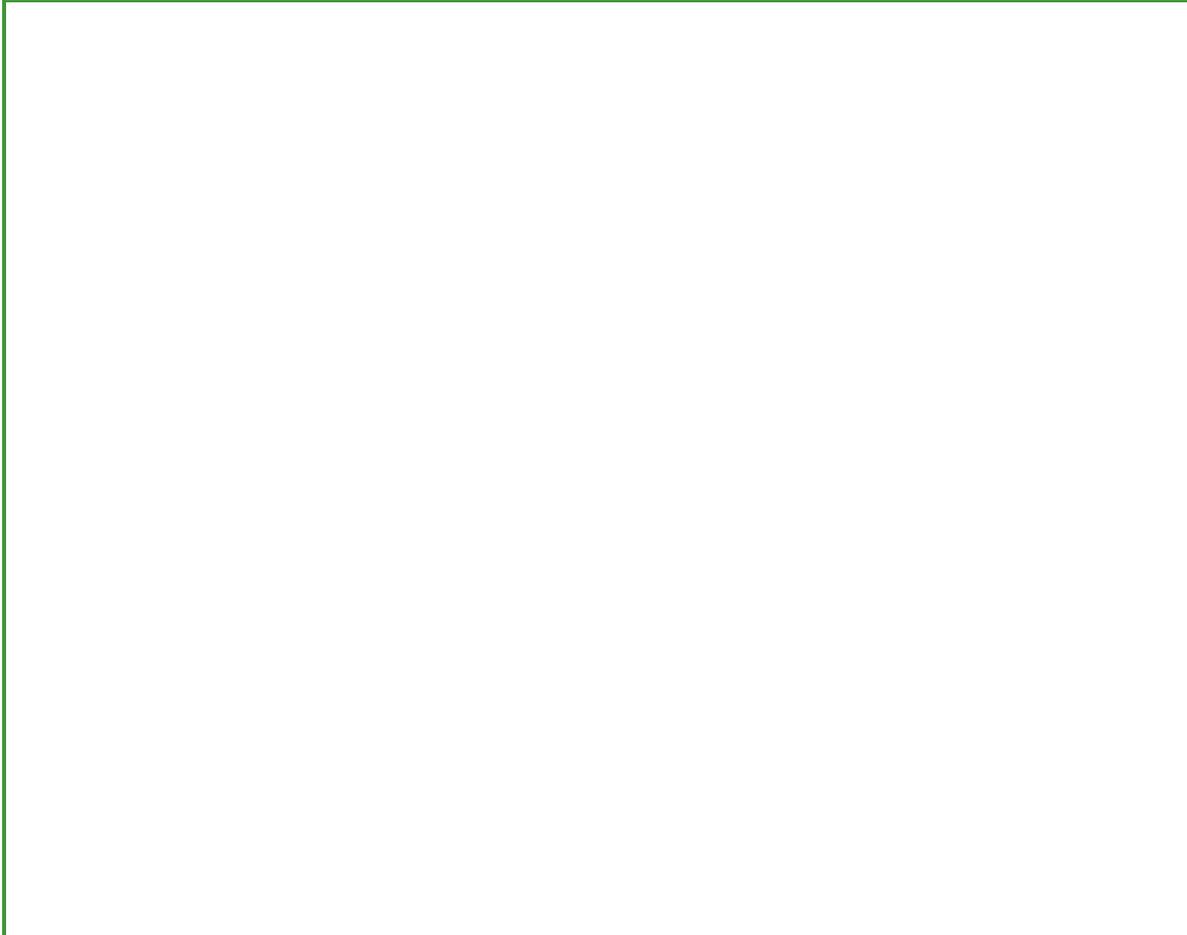
Age of bioretention facility: _____

Bioretention facility area (ft. x ft.): _____

Time since last rainfall (hr): _____

Quantity of last rainfall (in): _____

Site Sketch (include inlets, outlets, north arrow, flow direction, etc.)



Based on visual assessment of the site, answer the following questions and take photographs of the site:

Facility Footprint

1. Are there indications of any of the following in the bioretention facility? (If yes, mark on site sketch)
 - Erosion
 - Settlement
 - Seeps and wet spots
 - Rodent holes or water piping
 - Trash and debris
 - Leaves
 - Other: _____
 - None

2. Is there ponded water in the bioretention facility? Yes No

If yes, describe the potential reasons for ponded water below (leaf or debris build up, non-functional underdrain, groundwater input, illicit connection, inadequate capacity in facility, etc.)

Notes

Inlets/Outlets/Pipes

3. How many inlet structures are present? 0 1 2 3 4 5 > 5

Are any of the inlet structures clogged? (If yes, mark the location on your site sketch and fill in the boxes below with the cause of the clogging (e.g., debris, sediment, vegetation, etc.) No Partially Completely NA

4. Are any of the inlet structures altered from the original design or otherwise in need of maintenance? (If yes, write in reason: frost heave, vandalism, unknown, etc.)

	Inlet #:				
Partially clogged					
Completely clogged					
Reason for maintenance					

5. Are any trashracks, overflow or underdrains clogged?
- No Partially Completely NA
- a. If yes, mark the location on your site sketch and fill in the boxes below with the cause of the clogging (e.g., debris, sediment, vegetation, etc.)
- b. Are any of the overflow or bypass structures altered from the original design or otherwise in need of maintenance? (if yes, write in reason: frost heave, vandalism, unknown)

	Outlet #:	Outlet #:	Outlet #:
Partially clogged			
Completely clogged			
Reason for maintenance			

Vegetation

6. What is the approximate vegetation survival rate? _____%
- a. Does the current vegetation match the original design?
- Yes No Unknown
- b. Is there the presence of:
- Diseased plants
- Weeds
- Noxious weeds
- None of the above
- Other: _____
- c. Does the vegetation appear to be healthy?
- Yes No (If no, describe below)
- d. Is the vegetation the appropriate size and density?
- Yes No (If no, describe below)

Notes

Mulch

7. Are there any bare spots (without mulch cover) or locations with mulch depth less than 2 inches? Yes No
- If yes, mark on site sketch.

