Stormwater Facility Name:

Inspection Date:       Inspector:

Site Name:       Address:

Last Rainfall Date:       Last Rainfall Amount:

Weather Conditions:

1. Facility owner responsible for inspecting, maintaining, and repairing facility components after major storm events (greater than 1” in 24 hours) and semiannually. Comment on any deficiencies noted, list maintenance recommendations, and list maintenance actions taken and date of repair. Compare items to the design and as-built conditions, if available.



1. Provide documentation of items inspected with photographs where appropriate. Provide photographs before and after maintenance activities, if practical.
2. Inspection items with \* should be completed by a qualified professional every three years (or more frequently if concerns are noted).
3. Inspections done to determine the depth of accumulated sediments may be done once every 10 years.
4. Submit completed reports annually to [stormwaterreports@fdl.wi.gov](mailto:stormwaterreports@fdl.wi.gov).

| **Inspection Item** | **Maintenance Action** | **Comments** |
| --- | --- | --- |
| **Pond**  Debris / Trash Accumulation  Visible Pollution  Abnormal Water Levels  Sediment Accumulation \* | Clean Up / Remove  Contact Municipality  Contact Municipality  Regrade / Restore |  |
| **Control Structure**  Erosion or Backcutting  Debris in Culvert or Trash Rack  Undermining / Scour  Inoperable Flap Gate  Joint Separation \*  Cracks or Damage \* | Repair (fill, armor)  Clear / Remove  Contact Municipality  Contact Municipality  Contact Municipality  Contact Municipality |  |
| **Spillway**  Eroding or Backcutting  Overgrown Vegetation  Obstructions with Debris  Excessive Siltation  Slumping / Sloughing \* | Repair (fill, armor)  Cut / Trim  Clear / Remove  Remove (dredge)  Contact Municipality |  |
| **Downstream Area**  Erosion  Debris / Obstructions  Bridge / Culvert Problems \*  Buildings Issues \*  Foundation Concerns \* | Contact Municipality  Clear / Remove  Contact Municipality  Contact Municipality  Contact Municipality |  |

**Inspection Comments:**

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**Summary of Maintenance Completed Since Last Inspection:**

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**Maintenance Completed During Inspection:**

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**Maintenance Recommendations:**

Include timeline and additional site investigation, planning or engineering required. Provide applicable technical specifications.

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I hereby certify that the information provided on the inspection and maintenance log is truthful and accurate to my best professional judgement.

Name:

Date:

Signature: