



DINWIDDIE COUNTY

ENVIRONMENTAL DEPARTMENT

BMP OPERATION & MAINTENANCE INSPECTION (Bioretention Basin)

1. A licensed professional engineer must conduct all inspections.
2. All items must be inspected, and any discrepancies and necessary repairs must be noted.
3. Upon completion of the inspection, one (1) copy, indicating the discrepancies and repairs, is to be forwarded by the inspection firm to the: **Dinwiddie County Planning & Zoning Department, Attn: Environmental Administrator, P.O. Drawer 70 Dinwiddie, VA 23841**. This form is to be typed or in black/blue ink only. No color ink or pencil will be accepted.

General Information

Name of Project _____

Location of Project _____

Owner of Facility _____ Inspection Date _____

Does the current inspection, as summarized hereon, identify maintenance needs? YES NO

If yes, please complete the BMP Maintenance Follow-up portion.

Facility Information

| | | | |
|--------------------------------|-----------------------|-----------------|-------------------|
| Facility Type | Level 1 | Level 2 | |
| Hydraulic Configuration | On-line | Off-line | |
| Filtration media | No filtration | Sand | Bioretention Soil |
| | Peat | Other | |
| Type of Pre-Treatment Facility | Sediment Forebay | Plunge Pool | |
| | Sedimentation Chamber | Stone Diaphragm | |
| | Grass Filter Strip | Grass Channel | |
| | Other | | |

Contributing Drainage Area

| | | | |
|--|-----|----|-----|
| Excessive trash/debris | YES | NO | N/A |
| Adequate vegetation | YES | NO | N/A |
| Evidence of erosion / bare soils | YES | NO | N/A |
| Excessive landscape waste/yard clippings | YES | NO | N/A |
| Oil, grease or other unauthorized substances are entering the facility | YES | NO | N/A |

Pre-Treatment

| | | | |
|--|-----|----|-----|
| Adequate access to the pre-treatment facility | YES | NO | N/A |
| Excessive trash/debris/sediment | YES | NO | N/A |
| Evidence of erosion/exposed soils | YES | NO | N/A |
| Evidence of clogging (standing water, noticeable odors, water stains, algae or floating aquatic vegetation, or oil/grease) | YES | NO | N/A |
| Dead vegetation/exposed soil in the grass filter | YES | NO | N/A |

Inlet

| | | | |
|---|-----|----|-----|
| Sediment build-up at curb cuts, gravel diaphragms or pavement edges that prevent flow from getting into the bed | YES | NO | N/A |
| Evidence of bypassing | YES | NO | N/A |
| Excessive trash/debris/sediment | YES | NO | N/A |
| Evidence of erosion/undercutting at or around the inlet | YES | NO | N/A |

Vegetation

| | | | |
|-------------------------------------|-----|----|-----|
| 75 - 90% mulch and vegetation cover | YES | NO | N/A |
| Mulch depth is 2 -3 inches deep. | YES | NO | N/A |

| | | | |
|---|-----|----|-----|
| Plant composition is consistent with the approved plans. | YES | NO | N/A |
| Evidence of hydrocarbons or other deleterious materials, resulting in unsatisfactory plant growth or mortality. | YES | NO | N/A |
| Invasive species or weeds make up at least 10% of the facility's vegetation. If so, remove. | YES | NO | N/A |
| Grass is too high | YES | NO | N/A |
| Evidence of diseased dying or dead vegetation | YES | NO | N/A |

Side Slopes

| | | | |
|--|-----|----|-----|
| Excessive trash and/or debris | YES | NO | N/A |
| Evidence of sparse vegetative cover, erosion or slumping side slopes | YES | NO | N/A |
| Animal burrows | YES | NO | N/A |
| Significant sediment accumulation | YES | NO | N/A |

Filter Media

| | | | |
|---|-----|----|-----|
| The filter media is too low, too compacted, or the composition is inconsistent with design specifications | YES | NO | N/A |
| The mulch is older than 3 years or is otherwise in poor condition | YES | NO | N/A |
| There is evidence that chemicals, fertilizers, and/or oil/grease are present | YES | NO | N/A |
| There is excessive trash, debris, or sediment. | YES | NO | N/A |
| There is evidence of concentrated flows, erosion or exposed soil | YES | NO | N/A |
| The filter bed is clogged and/or filled inappropriately | YES | NO | N/A |

| | | | |
|--|-----|----|-----|
| The topsoil is in poor condition (e.g., the pH level is not 6-7, the composition is inappropriate, etc.) | YES | NO | N/A |
|--|-----|----|-----|

Underdrain/Proper Drainage

| | | | |
|--|-----|----|-----|
| The perforated pipe is not conveying water as designed | YES | NO | N/A |
|--|-----|----|-----|

| | | | |
|---|-----|----|-----|
| The underlying soil interface is clogged (there is evidence on the surface of soil crusting, standing water, the facility does not dewater between storms, or water ponds on the surface of basin for more than 48 hours after an event). | YES | NO | N/A |
|---|-----|----|-----|

Planters

| | | | |
|---|-----|----|-----|
| The planter is unable to receive or detain stormwater prior to infiltration. Water does not drain from the reservoir within 3-4 hours of after a storm event. | YES | NO | N/A |
|---|-----|----|-----|

| | | | |
|---|-----|----|-----|
| The planter has structural deficiencies, including rot, cracks, and failure, or the planter is unable to contain the filter media or vegetation | YES | NO | N/A |
|---|-----|----|-----|

Outlet/Overflow Spillway

| | | | |
|--|-----|----|-----|
| Outlets are obstructed or erosion and soil exposure is evident below the outlet. | YES | NO | N/A |
|--|-----|----|-----|

| | | | |
|---|-----|----|-----|
| There is excessive trash, debris, or sediment at the outlet | YES | NO | N/A |
|---|-----|----|-----|

| | | | |
|--|-----|----|-----|
| Any grates present are in good condition | YES | NO | N/A |
|--|-----|----|-----|

Observation Well

| | | | |
|--------------------------------|-----|----|-----|
| The observation well is capped | YES | NO | N/A |
|--------------------------------|-----|----|-----|

Overall

| | | | |
|---|-----|----|-----|
| Access to the facility or its components is adequate | YES | NO | N/A |
| Fences are inadequate | YES | NO | N/A |
| There is evidence of standing water | YES | NO | N/A |
| Mosquito proliferation | YES | NO | N/A |
| Encroachment on the pond or easement by buildings or other structures | YES | NO | N/A |
| Maintenance is critical to the proper function of the BMP | YES | NO | N/A |

Describe Repair Needed

Note: If more space is needed, attach a separate page.
