

Appendix L Maintenance Inspection Checklists

It is recommended that an annual maintenance inspection and cleanup be conducted at each BMP site, particularly at large-scale applications.

This appendix includes the following maintenance inspection checklists:

- Green Roof Maintenance Inspection
- Rainwater Harvesting Maintenance Inspection
- Impervious Surface Disconnection Maintenance Inspection
- Permeable Pavement System Maintenance Inspection
- Bioretention Maintenance Inspection
- Filtering System Maintenance Inspection
- Infiltration Practice Maintenance Inspection
- Open Channel System Maintenance Inspection
- Wet Ponds and Wetlands Maintenance Inspection
- Storage and Underground Detention Practices Maintenance Inspection
- Generic Structural BMP Maintenance Inspection
- Tree Planting and Preservation Maintenance Inspection
- Maintenance Service Completion Inspection

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DISTRICT DEPARTMENT OF THE ENVIRONMENT



Green Roof Maintenance Inspection Report

Name/Address: _____ WPD No. _____
Mailing Address: _____ Ward: _____
Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____
As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____
Accessibility: Public _____ Private _____ Maintenance Personal Only _____ (Number of Stories) _____ Roof Type: Flat / Slope
List all other stormwater management facilities on site: _____
Review of on-site maintenance logs: _____

1. Roof Condition:

Overflow Drains, Drain Boxes, Eaves, and Scuppers Condition: _____ Total Number _____
Membrane Condition _____ Flashing and Caulked Areas Condition _____ Roof Repair Needed _____
Debris/Sediment Accumulation _____ Root Penetration _____ Peeling or Physical Damage _____ Standing Water or Seepage _____
Amount of plant coverage _____
Observations _____

2. Vegetated Areas:

Roof Type: Intensive Extensive ___ Semi-intensive ___ Vegetative System: Plant-in-Place ___ Modular Tray ___ Vegetated Mat ___
Dead/diseased plants ___ Weeds, Unwanted Moss, Invasive Plants, or Pests ___ Thatch accumulation ___ Erosion or loss of media ___ Other ___
Approximate Number of Growing Seasons _____ Date of last Fertilizer, Pesticide or Top Dressing Application: ___
Observations (include media depth, fertility, scour): _____

3. Watering, Irrigation, and Leak Detection:

Method of Watering : Soaker or Drip Hose ___ Sprinkler ___ Misting System ___
Hose Condition _____ Mechanical Systems Components (timers, valves, sensors and filters) _____ Last Service Date _____
Leak Detection Provided Y/N Last Service Date _____
Observations _____

Inspector _____ Received By _____ Date _____

Figure L.1 Green Roof Maintenance Inspection Report.

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Rainwater Harvesting Maintenance Inspection Report

Name/Address: _____ WPD No. _____

Mailing Address: _____ Ward: _____

Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____

As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____

Secondary Practice (discharging to): pervious area _____ bioretention _____ infiltration practice _____ channel or swale: _____

List all other stormwater management facilities on site: _____

Review of on-site maintenance logs: _____

1. Tank and System Condition:

Tank Condition _____ Gutter and Pipe Condition _____ Pump and Electrical System Functioning Properly _____

Replacement Parts Needed _____ (specify components): _____

Observations _____

2. Inflow and Storage:

Debris in Gutters/ Downspouts _____ Debris in Prescreening Devices _____ Debris in First Flush Diverters _____

Mosquito Screens Inadequate _____ Sediment Accumulation in Tank _____ Inadequate Tank Drawdown _____ Inconsistent Reuse _____

Observations _____

3. Overflow:

Over flow Device Y/N, Type: _____ Outlet Erosion _____ Debris/ Sediment in Overflow _____ Repair Needed _____

Observations _____

Inspector _____ Received By _____ Date _____

Figure L.2 Rainwater Harvesting Maintenance Inspection Report.

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Impervious Cover Disconnection Maintenance Inspection Report

Name/Address: _____ WPD No. _____

Mailing Address: _____ Ward: _____

Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____

As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____

Type: Disconnection: Simple _____ Dry Well _____ Rain Garden _____ Other _____

List all other stormwater management facilities on site: _____

Review of on-site maintenance logs: _____

1. Contributing Drainage Area:

Type of Drainage Area: Rooftop _____ Parking Lot _____ Other _____

Observations _____

2. Receiving Area:

Improper Conveyance to Receiving Pervious Area _____ Receiving Area Encroachment _____

Compaction in Receiving Area _____ Erosion at Inflow Points _____ Erosion in Flow Path _____ Dead Vegetation _____

Exposed Soil _____ Sediment Accumulation _____ Evidence of Standing Water _____

Observations _____

Inspector _____ Received By _____ Date _____

Figure L.3 Impervious Cover Maintenance Inspection Report.

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Permeable Pavement Maintenance Inspection Report

Name/Address: _____ WPD No. _____
Mailing Address: _____ Ward: _____
Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____
As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____
Permeable Pavement Type: Porous Asphalt _____ Pervious Concrete _____ Permeable Pavers _____
List all other stormwater management facilities on site: _____
Review of on-site maintenance logs: _____

1. Surface Condition:

Debris/ Sediment Accumulation _____ Weed Accumulation _____ Evidence of Surface Clogging _____ Sweeping Needed _____
Surface Deformation or Spalling _____ Structural Repair Needed _____
Observations _____

2. Underdrains and Cleanouts:

Underdrains Y/N, Number: _____ Observation Wells Y/N, Number: _____
Evidence of Subsurface Clogging _____ Inadequate Drawdown _____ Standing Water _____ Last Rain Event >1" +/- _____ Days/Hours _____
Observations _____

3. Overflow:

Over flow Device Y/N, Type: _____ Debris/ Sediment in Overflow _____ Repair Needed _____
Observations _____

Inspector _____ Received By _____ Date _____

Figure L.4 Permeable Pavement Maintenance Inspection Report.

GOVERNMENT OF THE DISTRICT OF COLUMBIA
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Bioretention Practice Maintenance Inspection Report

Name/Address: _____ WPD No. _____

Mailing Address: _____ Ward: _____

Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____

As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____

Bioretention Type: Traditional ___ Streetscape ___ Tree Pits ___ Planters: _____ Residential: _____

List all other stormwater management facilities on site: _____

Review of on-site maintenance logs: _____

1. Inlets and Drainage Area Stabilization:

Inlet Type (s) _____ Total Number _____ Repair Needed _____ Debris/ Sediment Accumulation _____

Evidence of Erosion in Drainage Area ___ Area Needs Mowing or Clipping Removal ___ Drainage Area Debris Accumulation _____

Observations _____

2. Bioretention Practice:

Sediments/Trash Accumulation ___ Filter Surface Clogging ___ Erosion in Practice ___ Inadequate Mulch Thickness or Cover ___

Outlet: _____ Condition of Outlet _____ Debris/ Sediment in Overflow _____ Repair Needed _____

Underdrains and Cleanouts: Underdrains Y/N, Number: _____ Observation Wells Y/N, Number: _____

Evidence of subsurface clogging ___ Inadequate drawdown ___ Standing Water ___ Last Rain Event >1" +/- ___ Days/Hours _____

Observations _____

3. Plants:

Specific Number and Types of Plants in Place ___ Dead or Diseased plants ___ Stakes and Wires ___ Inadequate Watering ___

Observations _____

Note: A qualified professional must treat disease plants. Deficient stakes or wires must be replaced. Dead plants or plants beyond treatment must be replaced by plants meeting original specifications. New plants must be watered every day for the first 14 days after planting.

Inspector _____ Received By _____ Date _____

Figure L.5 Bioretention Maintenance Inspection Report.

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Filtering System Maintenance Inspection Report

Name/ Address: _____ WPD No. _____
Mailing Address: _____ Ward: _____
Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____
As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____
Structure Type: Cast in Place _____ Prefabricated _____ Name of Plant _____
List all other stormwater management facilities on site: _____
Review of on-site maintenance logs: _____

1. Structural Components and Filter Bed:

Pretreatment (Y/N), Type: _____ Condition: _____ Chambers Y/N, Number: _____ Condition: _____
Filter Bed Condition: _____ Oil/Grease Accumulation _____ Debris Accumulation _____ Evidence of Bypass _____
Observation Wells (Y/N), Condition: _____ Maintenance Doors (Y/N) , Condition: _____ Manholes (Y/N) Condition: _____
Valves/Drains (Y/N), Condition: _____ Water Seal (Y/N), Condition: _____ Other _____
Inadequate drawdown _____ Standing Water _____ Last Rain Event > 1" +/- _____ Hours/ Days
Observations _____

2. Inlets:

Type _____ Total Number _____ Repair Needed _____ Debris/Sediment Accumulation _____
Observations _____

3. Outlets:

Over flow Device (Y/N), Type: _____ Debris/ Sediment in Overflow _____ Repair Needed _____
Observations _____

Inspector _____ Received By _____ Date _____

Figure L.6 Filtering system Maintenance Inspection Report.

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Infiltration Practice Maintenance Inspection Report

Name/Address: _____ WPD No. _____

Mailing Address: _____ Ward: _____

Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____

As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____

Infiltration Device Type: Dry Well _____ Infiltration Trench _____ Infiltration Basin Other _____

List all other stormwater management facilities on site: _____

Review of on-site maintenance logs: _____

1. Inlets and Drainage Area Stabilization:

Inlet Type(s) _____ Total Number _____ Repair Needed _____ Debris/ Sediment Accumulation _____

Erosion in Drainage Area _____ Area Needs Mowing/Clipping Removal _____ Drainage Area Debris Accumulation _____ Pretreatment Bypass _____

Observations _____

2. Structural Components and Function:

Vegetation and Ground Cover Type: _____ Surface Erosion Present? (Y/N) _____

Condition of Infiltration Area _____ Observation Wells (Y/N), Number: _____ Condition: _____

Inadequate Drawdown _____ Standing Water _____ Debris/Sediment Accumulation _____

Last Rain Event >1" +/- _____ Days/Hours _____

Observations _____

3. Overflow:

Over flow Device (Y/N), Type: _____ Debris/ Sediment in Overflow _____ Repair Needed _____

Observations _____

Inspector _____ Received By _____ Date _____

Figure L.7 Infiltration Practice Maintenance Inspection Report.

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Open Channels Maintenance Inspection Report

Name/Address: _____ WPD No. _____

Mailing Address: _____ Ward: _____

Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____

As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____

Type of Open Channel System: Grass Channel _____ Dry Swale _____ Wet Swale _____ Other _____

List all other stormwater management facilities on site: _____

Review of on-site maintenance logs: _____

1. Inlets and Drainage Area Stability:

Type _____ Total Number _____ Repair Needed _____ Clear of Debris/Sediment _____

Erosion at Inlets _____ Evidence of Pretreatment Bypass _____ Evidence of Erosion in drainage area _____

Observations _____

2. Open Channel Practice:

Debris/ Sediment Accumulation _____ Erosion within Practice _____ Inappropriate Ponding of Water _____ Erosion at Outlets _____

Condition of Check Dams (if applicable) _____ Condition of Underdrain (if applicable) _____ Condition of Outlet _____

Observations _____

3. Vegetation:

Dead Vegetation _____ Bare Spots _____ Presence of Invasive Species _____ Re-vegetation Needed _____

Observations _____

Inspector _____ Received By _____ Date _____

Figure L.8 Open Channel System Maintenance Inspection Report.

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Wet Ponds and Wetlands Maintenance Inspection Report

Name/Address: _____ WPD No. _____

Mailing Address: _____ Ward: _____

Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____

As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____

Type of Practice: Wet Pond _____ Wetland _____ Underground Detention _____ Other _____

List all other stormwater management facilities on site: _____

Review of on-site maintenance logs: _____

1. Inlets and Drainage Area Stabilization:

Inlet Type(s) _____ Total Number _____ Repair Needed _____ Debris/ Sediment Accumulation _____

Erosion in Drainage Area _____ Drainage Area Debris Accumulation _____ Pretreatment Bypass _____

Observations _____

2. Practice Function and Structural Components:

Erosion within Practice _____ Debris/Sediment Accumulation _____ Inadequate Water Level _____ Excessive Algal Growth _____

Over flow Device (Y/N), Type: _____ Debris/ Sediment in Overflow _____ Repair Needed _____

Observations _____

3. Vegetation:

Dead or Diseased plants _____ Inadequate Vegetation _____ Lack of Aquatic Bench _____ Lack of Plant Diversity _____

Observations _____

Inspector _____ Received By _____ Date _____

Figure L.9 Wet Ponds and Wetlands Maintenance Inspection Report.

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Storage and Underground Detention Facilities Maintenance Inspection Report

Name/Address: _____ WPD No. _____
Mailing Address: _____ Ward: _____
Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____
As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____
Type of Storage Practice: Dry Pond _____ Underground Detention _____ Other _____
List all other stormwater management facilities on site: _____
Review of on-site maintenance logs: _____

1. Inlets and Drainage Area Stabilization:

Inlet Type (s) _____ Total Number _____ Repair Needed _____ Debris/ Sediment Accumulation _____
Erosion in Drainage Area _____ Drainage Area Debris Accumulation _____ Pretreatment Bypass _____
Observations _____

2. Practice Function:

Inadequate Vegetation and/or Ground Cover (if applicable) _____ Surface Erosion in Practice _____ Debris/Sediment Accumulation _____
Inadequate Drawdown _____ Standing Water _____ Last Rain Event >1" +/- _____ Days/Hours
Observations _____

3. Structural Components:

Over flow Device (Y/N), Type: _____ Debris/ Sediment in Overflow _____ Repair Needed _____
Vaults/Chambers (Y/N), Type: _____ Debris/ Sediment in Chambers _____ Repair Needed _____
Observations _____

Inspector _____ Received By _____ Date _____

Figure L.10 Storage and Underground Detention Facilities Maintenance Inspection Report.

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Generic Stormwater Management Facilities Maintenance Inspection Report

Name/Address: _____ WPD No. _____

Mailing Address: _____ Ward: _____

Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____

As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____

Device Type: Hydrodynamic treatment _____ Filtering treatment _____ Retention _____

List all other stormwater management facilities on site: _____

Review of on-site maintenance logs: _____

1. Inlets and Above Ground Condition:

Type _____ Total Number _____ Repair _____ Clear of debris _____ Graded Areas _____

Observations _____

2. Structure:

Access _____ Outlets _____ Elbows and Connections _____ Vaults and Chambers _____ Trash Racks _____

Observations _____

3. Overall Function:

Oil and Grease Accumulation _____ Sediment _____ Debris Accumulation _____ Last Rain > 1" +/- _____ Hours/Days

Observations _____

Inspector _____ Received By _____ Date _____

Figure L.11 Generic Maintenance Inspection Report.

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Tree Planting and Preservation Maintenance Inspection Report

Name/Address: _____ WPD No. _____
Mailing Address: _____ Ward: _____
Owner / Agent: _____ Telephone: _____ Lot: _____ Square: _____
As-Built Plan Available (Y/N) Last Inspection Date: _____ Last Service Date: _____ Service Contract (Y/N), Type: _____
Tree Type(s): New _____ Preserved: _____
List all other stormwater management facilities on site: _____
Review of on-site maintenance logs: _____

1. Tree Condition:

Adequately watered _____ Dead/broken/diseased branches pruned _____ Trunk protected _____ Root collar exposed _____
Mower/weed whip damage, vandal damage, animal damage _____ Insect or disease problems _____
Observations _____

2. Mulching:

2-4 inch deep mulch _____ Mulch not against trunk _____
Observations _____

3. Staking (if needed):

Tree age < 1 year: Stakes in place _____ Webbing or ties hampering growth of tree _____
Tree age > 1 year: Stakes removed _____
Observations _____

Inspector _____ Received By _____ Date _____

Figure L.12 Tree Planting and Preservation Maintenance Inspection Report.

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Maintenance Service Completion Inspection Report

Name/Address: _____

Owner/ Agent: _____ WPD No: _____

Mailing Address: _____

Service Providers: _____

Maintenance Service Start Date: _____

Maintenance Service Completion Date: _____

Type of Stormwater Practice Serviced: _____

Description of Work: _____

Is the maintenance service satisfactory? Yes/No If no, list items to be completed: _____

Inspector _____ Received By _____ Date _____

Figure L.13 Maintenance Service Completion Report.