

# Annual Stormwater Control Measure (SCM) Inspection Report

## BIORETENTION CELL

Project Name: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

SCM Location: \_\_\_\_\_ SCM ID Number: \_\_\_\_\_

*(If applicable and as labeled on Town-approved Construction Plans)*

**Code Key:**

N/A = Not Applicable	M = Monitor (potential for future problem)
NP = Not a Problem	WN = Work Needed (not consistent with approved plans)



**INLET DEVICE(S)**

Assessment	Code	Comments
Obstruction: vegetation/debris/sediment		
Structural condition		
Erosion/undercutting		
Dissipator pad condition		
Other (describe)		

**BIORETENTION CELL**

Assessment	Code	Comments
Overgrown vegetation		
Plants are dead, diseased, or dying ( <i>Replace such plants as necessary per original approved construction plans.</i> )		
Invasive vegetation		
Mulch is breaking down or displaced		
Soils/mulch clogged with sediment		
Erosion/gullies present		
Standing water ( >12 hours after storm)		
Underdrain system (if applicable)		
Other (describe)		

**OUTLET DEVICE**

Assessment	Code	Comments
Obstruction: vegetation/debris/sediment		
Structural condition		
Erosion/undercutting		
Dissipator pad condition		
High-flow bypass (if applicable)		
Other (describe)		

**MISCELLANEOUS**

Assessment	Code	Comments
Trash/debris		
Access		
Vandalism		
Signage (if applicable)		
Other (describe)		

**PHOTOGRAPHS**

Attach color digital photographs of the site and SCMs including a caption describing each photo.

**ADDITIONAL COMMENTS**

---

---

---

---

---

---