City of Asheville Stormwater Services
Operation and Maintenance Inspection Report

Date: _____________

Property PIN #: ____________________________

Address of facility: ___________________________

Maintenance Agreement recorded in Buncombe County Deed Book: _______ at Page _______

Land Owner: ____________________________________________________________

Responsible Party: ____________________________ □Individual □HOA □Other

If HOA, Current President: _____________________________________________________

Mailing Address: ___________________________________________________________

City: ____________________________ State: __________ Zip Code: _____________

Phone Number: ________________ E-mail: ____________________________

Type of Stormwater being inspected (check all boxes that apply):  

☐ Dry Detention ☐ Wet Detention ☐ Bio-Retention Area ☐ Constructed Wetland
☐ Underground storage ☐ Level Spreader ☐ Rain Garden ☐ Detention Swale
☐ Other: ____________________________

Has the system been modified from the original plans? ☐ Yes ☐ No
If yes, describe modifications: ____________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

Do the modifications change the designed capacity and or the designed function of the stormwater system? ☐ Yes ☐ No ☐ N/A

If the system is located in a common area is there any encroachment from surrounding property owners on ponds and or easements? ☐ Yes ☐ No ☐ N/A
Is there any evidence or erosion at pond overflow spillways, or at downstream toe of drop structures, or in grass channels or swells? □ Yes □ No □ N/A

If yes please describe: __________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Is there evidence of sedimentation build up in any detention/retention areas? □ Yes □ No □ N/A

If yes please describe: __________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Is there evidence of invasive plant species in vegetated areas? □ Yes □ No □ N/A

If yes please describe: __________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Is there any visual settlement, or horizontal misalignment of the stormwater dam, or animal burrows, or cracking, bulging, or sliding of dam? □ Yes □ No □ N/A

If yes please describe: __________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

What is the overall condition of the facility? □ Excellent □ Good □ Fair □ Poor

List any maintenance problems or repairs that need to be made to insure the continued proper operation of the stormwater facility: __________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Property owner has made all repairs: ☐ Yes ☐ No ☐ N/A

If no please explain: ___________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

I ____________________________ a _______________________________, licensed to Practice in the state of North Carolina do hereby certify that I inspected the above named site on the _____________ day of ___________________, 20____ and all inspected structural BMP(s) are performing properly with no additional measures required and are in compliance with the terms and conditions of the recorded maintenance agreement.

__________________________________
Signature (seal)