



**Town of Bluffton
Manufactured Treatment Device
Maintenance Inspection Checklist**

BMP ID _____

Date and Time: _____

Site/ Project Name _____

Location: _____

Inspection Results: (Check Only One)	
<input type="checkbox"/>	Fully Functional (No Problems Found During Inspection)
<input type="checkbox"/>	Minor Functional Issues (Can be corrected during routine maintenance throughout the year)
<input type="checkbox"/>	Partially Functional*
<input type="checkbox"/>	Not Functional*

*BMP inspector will re-visit the site for a follow-up inspection to ensure deficiencies noted in this inspection checklist are completed and submit an updated inspection report to the Town of Bluffton within 60 days.

<i>Key Questions</i>		
Item	X	Comments
1. Type of stormwater practice (check all that apply)		
a. Type 1 - Separation Device (Standard Stormwater MTD)	<input type="checkbox"/>	
b. Type 2 - Filtration Devices (Impaired Water Bodies, TMDL Requirements)	<input type="checkbox"/>	
c. Type 3 - Catch Basin Insert (limited Right-of-Way)	<input type="checkbox"/>	
d. Other	<input type="checkbox"/>	

A. Contributing Drainage Area	
0 = Good condition. Well maintained, no action required.	
1 = Moderate condition. Adequately maintained, routine maintenance needed.	
2 = Degraded condition. Poorly maintained, routine maintenance and repair needed.	
3 = Serious condition. Immediate need for repair or replacement.	
<input type="checkbox"/>	Inspected
<input type="checkbox"/>	Not Inspected
Item	Comments
1. Excessive trash/debris	0 1 2 3 N/A
2. Bare/exposed soil	0 1 2 3 N/A
3. Excessive landscape waste/yard clippings	0 1 2 3 N/A
4. Oils, greases, paints and other harmful substances disposed of in drainage area.	0 1 2 3 N/A

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B. Inflow Points

0 = Good condition. Well maintained, no action required.
 1 = Moderate condition. Adequately maintained, routine maintenance needed.
 2 = Degraded condition. Poorly maintained, routine maintenance and repair needed.
 3 = Serious condition. Immediate need for repair or replacement.

<input type="checkbox"/>	Inspected						
<input type="checkbox"/>	Not Inspected						
Item		Comments					
1.	Inflow points (e.g. curb cuts, edge of pavement) provide stable conveyance into practice	0	1	2	3	N/A	
2.	Excessive trash/debris/sediment	0	1	2	3	N/A	
5.	Inflow hindered by soil height, build up of sediment and/or grass	0	1	2	3	N/A	
6.	Asphalt/concrete crumbling at inlets	0	1	2	3	N/A	
7.	Structural condition	0	1	2	3	N/A	
8.	Filter Condition	0	1	2	3	N/A	
9.	Other	0	1	2	3	N/A	

C. Practice (Separatory Body)*

0 = Good condition. Well maintained, no action required.
 1 = Moderate condition. Adequately maintained, routine maintenance needed.
 2 = Degraded condition. Poorly maintained, routine maintenance and repair needed.
 3 = Serious condition. Immediate need for repair or replacement.

<input type="checkbox"/>	Inspected						
<input type="checkbox"/>	Not Inspected						
Item		Comments					
1.	Maintenance access to area	0	1	2	3	N/A	
2.	Access hatch condition	0	1	2	3	N/A	
3.	Separator structural condition	0	1	2	3	N/A	
4.	Central shaft condition	0	1	2	3	N/A	
5.	Access ladder/steps condition	0	1	2	3	N/A	
6.	Water Level	0	1	2	3	N/A	

* All applicable OSHA requirements should be followed for any confined spaces

D. Pollution Capture Functions

<input type="checkbox"/>	Inspected				
<input type="checkbox"/>	Not Inspected				
Item	Designed Cleaning Level (from manufacturer)	Amount in System (Measure)	Date Measured	Instructions/Notes	
1.	Oil Collection Level				
2.	Sediment Level				
3.	Trash Conditions				
4.	Other				

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E. Outlet						
0 = Good condition. Well maintained, no action required.						
1 = Moderate condition. Adequately maintained, routine maintenance needed.						
2 = Degraded condition. Poorly maintained, routine maintenance and repair needed.						
3 = Serious condition. Immediate need for repair or replacement.						
<input type="checkbox"/>	Inspected					
<input type="checkbox"/>	Not Inspected					
Item				Comments		
1.	Outlets provide stable conveyance out of practice	0	1	2	3	N/A
2.	Evidence of erosion at/around outlet	0	1	2	3	N/A
3.	Excessive trash/debris/sediment	0	1	2	3	N/A
4.	Evidence of polluted water being released – discoloration, odor, staining, etc.	0	1	2	3	N/A
5.	Encroachment on pervious area or easement by buildings or other structures	0	1	2	3	N/A
6.	Joint failure/ Loss of joint material	0	1	2	3	N/A
7.	Leaking device	0	1	2	3	N/A
8.	Emergency by-pass condition	0	1	2	3	N/A
9.	Filter fabric present under rip-rap	0	1	2	3	N/A
10.	Condition of fabric under rip-rap	0	1	2	3	N/A
11.	Rip-rap size and quantity	0	1	2	3	N/A
12.	Other	0	1	2	3	N/A

F. Miscellaneous						
0 = Good condition. Well maintained, no action required.						
1 = Moderate condition. Adequately maintained, routine maintenance needed.						
2 = Degraded condition. Poorly maintained, routine maintenance and repair needed.						
3 = Serious condition. Immediate need for repair or replacement.						
<input type="checkbox"/>	Inspected					
<input type="checkbox"/>	Not Inspected					
Item				Comments		
1.	Trash/debris around the unit	0	1	2	3	N/A
2.	Access to unit	0	1	2	3	N/A
3.	Hazardous fumes/odors present	0	1	2	3	N/A
4.	Other	0	1	2	3	N/A

Inspector's Summary:

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Inspector's Summary (continued):

Photographs (minimum of five (5) photos as attachment)

Photo ID	Description
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

Sketch of Practice

(note problem areas and attach sketch)

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