



Town of Bluffton
Impervious Surface Disconnection
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 impervious area disconnected					
a. Rooftop	<input type="checkbox"/>				
b. Parking	<input type="checkbox"/>				
c. Other	<input type="checkbox"/>				
2. Type of disconnection surface					
a. Managed turf areas	<input type="checkbox"/>				
b. Forest cover or preserved open space	<input type="checkbox"/>				
c. Soil compost amended filter path	<input type="checkbox"/>				
3. Type of forest cover or open space (if applicable)					
a. Forest	<input type="checkbox"/>				
b. Meadow/Brush	<input type="checkbox"/>				
c. Other	<input type="checkbox"/>				
4. Vegetative Cover Condition	0 1 2 3 N/A				
5. Meets width/length requirement	0 1 2 3 N/A				

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. Excessive landscape waste/yard clippings	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.
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- 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. downspouts, curb cuts, edge of pavement, level spreader) provide stable conveyance into practice	0	1	2	3	N/A	
2.	Runoff enters pervious area as sheet flow	0	1	2	3	N/A	
3.	Excessive trash/debris/sediment	0	1	2	3	N/A	
4.	Evidence of erosion at/around inflow points	0	1	2	3	N/A	
5.	Level spreader functional, if applicable	0	1	2	3	N/A	

C. Practice (Pervious Area Receiving Runoff)

- 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.
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<input type="checkbox"/>	Inspected						
<input type="checkbox"/>	Not Inspected						
Item							Comments
1.	Maintenance access to area	0	1	2	3	N/A	
2.	Downspouts or surface impervious area drains to the receiving pervious area (doesn't bypass)	0	1	2	3	N/A	
3.	Receiving pervious areas retain dimensions as shown on plans and are in good	0	1	2	3	N/A	
4.	Excessive trash/debris/sediment	0	1	2	3	N/A	
5.	Evidence of standing water:	0	1	2	3	N/A	
	a. Ponding	<input type="checkbox"/>					
	b. Noticeable odors	<input type="checkbox"/>					
	c. Water stains	<input type="checkbox"/>					
	d. Presence of algae or floating aquatic vegetation	<input type="checkbox"/>					
6.	Evidence of erosion	0	1	2	3	N/A	
7.	Evidence of oil/chemical accumulation	0	1	2	3	N/A	
8.	Vegetation	0	1	2	3	N/A	
	a. Plant composition consistent with approved plans	0	1	2	3	N/A	
	b. Presence of invasive species/weeds	0	1	2	3	N/A	
	c. Dead vegetation/exposed soil	0	1	2	3	N/A	

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d. Disturbance to natural vegetation or excessive maintenance (e.g. mowing, tree cutting)	0	1	2	3	N/A
e. Restoration planting survival, if	0	1	2	3	N/A
9. Conservation area signs (if applicable)	0	1	2	3	N/A
10. Level spreader (if applicable)	0	1	2	3	N/A

D. Miscellaneous

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<input type="checkbox"/> Inspected							
<input type="checkbox"/> Not Inspected							

Item						Comments
1. Complaints from local residents	0	1	2	3	N/A	
2. Mosquito proliferation	0	1	2	3	N/A	
3. Encroachment on pervious area or easement by buildings or other structures	0	1	2	3	N/A	

Inspector's Summary:

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<i>Photographs (minimum of five (5) photos as attachment)</i>	
Photo ID	Description
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	

<i>Sketch of Practice</i>
(note problem areas)