



### Infiltration Trench Inspections and Maintenance Checklist

Site Name: \_\_\_\_\_ Owner Change since last inspection? Y N

Location: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Site Status: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Site conditions: \_\_\_\_\_

*Inspection Frequency Key: A=annual; M=monthly; S=after major storms*

Inspection Items	Inspection Frequency	Inspected? (Yes/No)	Maintenance Needed? (Yes/No)	Comments/Description
<b>Debris Removal</b>				
Trench surface clear of debris?	M			
Contributing area free of debris?	M			
Inlets/Inflow pipes free of debris?	M			
Overflow spillway clear of debris?	M			
<b>Vegetation</b>				
Mowing done when necessary?	M			
Unauthorized or inappropriate plantings?	A			
Fertilized per specification?	M			
Evidence of erosion?	M			
Contributing drainage area stabilized?	M			
Trees growing in the trench?	A			
<b>Dewatering</b>				
Trench dewatered between storms?	M			
<b>Sediment traps, forebays, or pretreatment swales</b>				
Adequately trapping sediment?	A			
Structural damage?	A			
Greater than 50% of original storage volume remaining?	A			
<b>Sediment removal of trench</b>				
Any evidence of sedimentation in trench?	A			
Are pea gravel/topsoil and top surface filter fabric functioning properly?	M			
Does sediment accumulation currently require removal?	A			



Inspection Items	Inspection Frequency	Inspected? (Yes/No)	Maintenance Needed? (Yes/No)	Comments/Description
<b>Inlets</b>				
Good condition (no need for repair)?	A			
Evidence of erosion?	A			
<b>Outlets/overflow spillway</b>				
Good condition (no need for repair)?	A			
Evidence of erosion?	A			
<b>Aggregate repairs</b>				
Surface of aggregate clean?	A			
Top layer of stone in need of replacement?	A			
Trench in need of rehabilitation?	A			
<b>Observation wells</b>				
Evidence of clogging/failure to percolate? (Should percolate within 3 days.)	M			
Has drawdown rate been measured at observation well and is well capped?	A			
<b>Hazards</b>				
Have there been complaints from residents?	M			
Public hazards noted?	M			

Inspector Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Overall Condition of Facility:  Acceptable  Unacceptable

If any of the above Inspection Items are checked "Yes" for "Maintenance Needed," list Maintenance actions and their completion dates below:

Maintenance Action Needed	Due Date

The next routine inspection is scheduled for approximately: \_\_\_\_\_  
 (date)

Inspected by: (signature) \_\_\_\_\_  
 Inspected by: (printed) \_\_\_\_\_