

AASCD NAME: _____ LOCATION: _____

PERMIT/CAPITAL PROJECT#: _____

BMP GROUP 4 – STORMWATER FILTERING SYSTEMS Construction inspection Checklist

PHASE	DATE	INITIALS	REMARKS –Description of Actions Taken
EXCAVATION A. Size and Location B. Side Slope Stability C. Soil Permeability D. Groundwater/Bedrock E. Setbacks Per Design Manual			
FILTER FABRIC A. Fabric Specifications B. Sides & Top (Infiltration) C. Sides, Top, Bottom (Attenuation)			
AGGREGATE MATERIAL A. Size B. Placement			
LEADERS & CLEAN-OUTS A. Inlet Pipe B. Surcharge Pipe (s) C. Pipe Size and Type D. Outlet Pipe			
FILTER MEDIA SAND GRAVEL			
INLET STRUCTURES A. Inverts and Elevations B. Receives Designed Drainage Area C. Access Grates			
LANDSCAPING A. Shrubs B. Trees C. Grasses			

I HEREBY CERTIFY THAT I PERSONALLY REVIEWED OR A PERSON UNDER MY DIRECT SUPERVISION PROVIDED THE INFORMATION REPORTED ON THIS CHECKLIST AND TO THE BEST OF MY KNOWLEDGE DO HEREBY INSURE THAT THE SUBMITTAL IS COMPLETE AND ACCURATE.

 PROFESSIONAL ENGINEER SIGNATURE AND DATE