

AASCD NAME: _____ LOCATION: _____

PERMIT/CAPITAL PROJECT#: _____

BMP GROUPS 2 & 5 – WETLANDS AND OPEN CHANNEL SYSTEMS Construction inspection Checklist

<i>PHASE</i>	<i>DATE</i>	<i>INITIALS</i>	<i>REMARKS –Description of Actions Taken</i>
EXCAVATION A. Size and Location B. Side Slope Stability C. Soil Permeability D. Groundwater/Bedrock			
VEGETATIVE SWALE A. Stabilization (Permanent) B. Gradient & Inverts C. Drainage Area D. Outlet (Non-Erosive)			
CHECK DAMS A. Number/Dimension B. Type C. Compaction (Earth Type) D. Aggregate Type and Size E. Inverts/Elevations			
LANDSCAPING			
STRUCTURES AND PIPES A. Under Drains B. Inflows and Outflows C. Weirs D. Rock Beds E. Facines F. Coconut Rolls			
AGGREGATE A. Sands B. Gravel			

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