

**ANNE ARUNDEL COUNTY DEPARTMENT OF INSPECTIONS AND PERMITS
BMP GROUPS 2 & 5 - WETLAND AND OPEN CHANNEL SYSTEMS CONSTRUCTION INSPECTION CHECKLIST**

AASCD NAME: _____ LOCATION: _____

GP #: _____ AASCD #: _____ SWM #: _____ TYPE OF SYSTEM: _____

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

* DATE REFLECTS CONTRACTOR/ENGINEER PHOTO DATES OF SITE VISIT.

PROFESSIONAL ENGINEER SIGNATURE

SEAL

DATE