

**ANNE ARUNDEL COUNTY DEPARTMENT OF INSPECTIONS AND PERMITS
BMP GROUP 3 - INFILTRATION PRACTICES 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 E. Setbacks per Design Manual			
2. FILTER FABRIC A. Fabric Specifications B. Sides and Top (Infiltration) C. Sides, Top, Bottom (Attenuation)			
3. AGGREGATE MATERIAL A. Type (Slag, # Crushed, Gravel) B. Size C. Placement			
4. OBSERVATION WELL/ROOF LEADERS A. Roof Leaders B. Surcharge Pipe(s) C. Pipe Size and Type D. Minimum Cover (1 foot)			
5. SURFACE LAYER A. Aggregate Surface B. Vegetative Surface C. Paved Surface			
6. INLET STRUCTURE A. Inverts and Elevations B. Receives Designed Drainage Area			

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