

Stormwater Facility Annual Operation and Maintenance Inspection Report

Please complete, sign and return this form to:
 Rinta Perkins, City of Walnut Creek
 1666 N. Main Street, Walnut Creek, CA 94596
 Be sure to include the appropriate Inspection and Administrative Fees

General	
SITE NAME	ADDRESS
DATE AND TIME OF VISIT	REASON FOR INSPECTION (e.g. routine/annual, follow-up, or response to complaint)
Review of Stormwater Control Operation and Maintenance Plan	
Was the on-site copy of the Plan available on request? <input type="checkbox"/> YES <input type="checkbox"/> NO	SECTIONS OUT OF DATE AND UPDATES NEEDED:
Date of last update to Plan: ____/____/____	<input type="checkbox"/> Owner contact Information <input type="checkbox"/> Information on changes to facilities <input type="checkbox"/> Records of previous inspections <input type="checkbox"/> Other:
MAINTENANCE LOGS: <input type="checkbox"/> Consistent with maintenance schedule in Plan. <input type="checkbox"/> Not consistent with maintenance schedule (note exceptions):	
Results of Site Inspection	
Overall condition of site and any exceptional circumstances:	
LIST STORMWATER FACILITIES INSPECTED (Use designations/IMP #s from Plan)	ITEMS INSPECTED AND EXCEPTIONS NOTED:
_____ _____ _____ _____ _____ _____ _____ _____ _____ _____	
Compliance Summary and Recommended Follow-up	
SITE STATUS: <input type="checkbox"/> In compliance—no corrective actions required. <input type="checkbox"/> In compliance—Implement corrective actions. <input type="checkbox"/> Not in compliance—Correct and reinspect.	FOLLOW-UP PLAN AND SCHEDULE: INSPECTOR: _____ DATE: _____