



Maintenance Form 5.6 – Infiltration Trench:

Infiltration Trench LID SWMF		
Owner:		
Address:		
Phone:		
E-mail:		
Parcel Number:		
Date of Last Inspection:		
- Please attach pictures		
List any additional LID SWMF on site:		
List any previous concerns:		
Inspection List - Please attach pictures	Yes	No
Does water drain freely through the system?	<input type="checkbox"/>	<input type="checkbox"/>
Are there any areas with prolonged standing water around the infiltration trench?	<input type="checkbox"/>	<input type="checkbox"/>
Is there a buildup of sediment in the infiltration trench?	<input type="checkbox"/>	<input type="checkbox"/>
Is the system over flowing?	<input type="checkbox"/>	<input type="checkbox"/>
Are sediment basins clean and clear from buildup (if applicable)?	<input type="checkbox"/>	<input type="checkbox"/>
Has the soil settled or eroded around the infiltration trench?	<input type="checkbox"/>	<input type="checkbox"/>
Has there been any soil compaction within or around the trench?	<input type="checkbox"/>	<input type="checkbox"/>
Last time sediment was removed from the infiltration trench.		
Maintenance Items To be Completed:		
By signing this form, I certify that I have inspected this system.		
Owners Signature	Date	