



Maintenance Form 5.2 – Rain Garden:

| | | |
|--|--------------------------|--------------------------|
| Rain Garden LID SWMF | | |
| Owner: | _____ | |
| Address: | _____ | |
| | _____ | |
| Phone: | _____ | |
| E-mail: | _____ | |
| Parcel Number: | _____ | |
| | _____ | |
| Date of Last Inspection: | _____ | |
| List any additional LID SWMF on site: | | |
| | | |
| List any previous concerns: | | |
| | | |
| Inspection List | Yes | No |
| Are sediment basins clean and clear from sediment build up? | <input type="checkbox"/> | <input type="checkbox"/> |
| Is there any apparent erosion in the area? | <input type="checkbox"/> | <input type="checkbox"/> |
| Has the soil settled? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are there any areas with standing water? | <input type="checkbox"/> | <input type="checkbox"/> |
| Has there been any soil compaction within or near the rain garden? | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the area directly around the perimeter of the raingarden fully vegetated? | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the vegetation thriving? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are there any area with stressed or dying plants? | <input type="checkbox"/> | <input type="checkbox"/> |
| When was the last date of sediment removal? | | |
| - Please attach pictures | | |
| Maintenance Items To be Completed: | | |
| | | |
| By signing this form, I certify that I have inspected this system. | | |
| _____ | Owners Signature | _____ |
| | | Date |