



## SCM ANNUAL INSPECTION REPORT

This completed certification and accompanying materials are to be submitted to the Town of Wilson's Mills each year on or before July 1, for Stormwater Control Measures (SCM). All SCMs shall be maintained in accordance with instructions for the specific measures, as described in the Town's Ordinances. At minimum, maintenance activities shall conform to the guidelines contained therein, and shall maintain the SCMs as designed for optimal functioning.

**\*\*Failure to comply with inspection requirements will result in the Town completing the inspection at a charge of \$2,500 per SCM.**

### **GENERAL INFORMATION:**

Project Name: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Property Owner: \_\_\_\_\_  
Property Owner Address: \_\_\_\_\_  
Owner Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
Johnston County Tax Parcel Id No(s). \_\_\_\_\_  
Date of Inspection: \_\_\_\_\_ Recorded Book/Page for each required SCM: \_\_\_\_\_

Results of the inspection:  Non-Compliant  Compliant with Maintenance  Compliant

### **BMP DESCRIPTION AND QUANTITY:** *(Designate all that apply)*

Dry Detention Basin  Sand Filter  Grassed Swale  
 Cistern  Wet Detention Basin  Level Spreader  
 Permeable Pavement  Stormwater Wetland  Bioretention Area  
 Riparian Buffers  Underground Storage/Detention  
 Proprietary Devices/Other: \_\_\_\_\_

### **INFORMATION OF ALL BMPs:**

Additional pages are required to complete this SCM Annual Inspection Report. A narrative for each BMP is to be provided that details the current condition. Photographs are to be included to document sufficiently the current condition of all structures and features. \_\_\_\_\_ *(Please read & initial confirming these items are attached)*

### **ENGINEER CERTIFICATION:**

As a duly registered professional engineer in the State of North Carolina, I hereby attest that all required SCMs for the above referenced project were thoroughly inspected under my responsible charge, were found to be performing properly and were in compliance with any approved stormwater management plan, applicable operation and maintenance agreements, and the Town of Wilson's Mills standards and regulations.

Certifier's Name: \_\_\_\_\_  
Title: \_\_\_\_\_ License Number: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Seal/Signature/Date