



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 (*Maintenance*) ☐ Compliant (*Monitor*) ☐ 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