



## Erosion and Sediment Control Inspection Report

Date and Time: \_\_\_\_\_ Inspector(s): \_\_\_\_\_

Project Name: \_\_\_\_\_ LDP #: \_\_\_\_\_

Type of Inspection: Routine Inspection \_\_\_\_\_ District Inquiry \_\_\_\_\_ Citizen Inquiry \_\_\_\_\_

Are all erosion control devices installed per the approved construction plans? Yes \_\_\_ No \_\_\_\_\_

If no, explain: \_\_\_\_\_

Stage of Construction:  Grading  Storm  Curb  Paving  Sidewalk  Landscape  Final Stabilization

Weather: \_\_\_\_\_ Site Conditions: Wet \_\_\_ Medium \_\_\_ Dry \_\_\_\_\_

<u>ITEM</u>	<u>STATUS</u>
<input type="checkbox"/> Bf: Buffer Zone	Passed:___ Failed:___
<input type="checkbox"/> Ds1: Soil Stabilization:(mulch only-6"to 10")	Passed:___ Failed:___
<input type="checkbox"/> Ds2: Soil Stabilization:(temporary seeding)	passed:___ Failed:___
<input type="checkbox"/> Ds3: Soil Stabilization:(permanent vegetation)	Passed:___ Failed:___
<input type="checkbox"/> 14 Day Vegetation Rule	Passed:___ Failed:___
<input type="checkbox"/> Du: Dust Control	Passed:___ Failed:___
<input type="checkbox"/> Cd: Check Dams	Passed:___ Failed:___
<input type="checkbox"/> Ch: Channel Stabilization: Rip/Rap___ Vegetation___	Passed:___ Failed:___
<input type="checkbox"/> Co: Construction Exit Pad	Passed:___ Failed:___
<input type="checkbox"/> Ge: Geotextiles	Passed:___ Failed:___
<input type="checkbox"/> Rd: Rock Filter Dam	Passed:___ Failed:___
<input type="checkbox"/> Rt: Retrofitting (Detention Ponds/ Sediment Traps)	Passed:___ Failed:___
<input type="checkbox"/> Sd1: Sediment Barrier: Type A___ Type C___	Passed:___ Failed:___
<input type="checkbox"/> Sd2: Inlet Sediment Trap	Passed:___ Failed:___
<input type="checkbox"/> d3: Temporary Sediment Basin	Passed:___ Failed:___
<input type="checkbox"/> Sr: Temporary Stream Crossing	Passed:___ Failed:___
<input type="checkbox"/> St: Storm Drain Outlet Protection	Passed:___ Failed:___
<input type="checkbox"/> Other: (specify of see attached diagram)	Passed:___ Failed:___

- A) Did any item in previous section fail? Yes \_\_\_ No \_\_\_  
 If yes, what action was taken? Verbal Notification \_\_\_\_\_ Non-Compliance \_\_\_\_\_ Stop Work \_\_\_\_\_  
 Summons to court \_\_\_\_\_  
 If verbal notification was given, please explain. \_\_\_\_\_
- B) What period was given to comply with above referenced notice? Days:\_\_\_ Weeks:\_\_\_
- C) Have any complaints or violations been issued on this project previously? Yes:\_\_\_ No:\_\_\_  
 If yes, please explain. Violations \_\_\_\_\_ Fines \_\_\_\_\_
- D) Are there any zoning stipulations on the approved plans or recorded final plat? Yes:\_\_\_  
 No:\_\_\_\_\_
- E) Are there any streams, lakes, ponds, creeks, or State Waters on this site? Yes:\_\_\_ No:\_\_\_
- F) Were all permits posted? Yes:\_\_\_ No:\_\_\_
- G) Are erosion and sediment control plans and/or log on site? Yes:\_\_\_ No:\_\_\_
- H) Were there any illicit discharge and/ or illegal connections noted during the inspection? Yes: \_\_\_  
 No:\_\_\_

Comments: \_\_\_\_\_