



Permanent Stormwater Control Measure (PSCM) | Inspection Form

Grass Swale Inspection

This form should be completed to satisfy the inspection requirements for the PSCM permit. For each component the form includes checklists of items to be inspected and associated maintenance activities.

PSCM Permit Number: _____ PSCM Facility Number: _____ Project/Site Name: _____
 Inspector Name & Company: _____ Inspection Date: _____
 Inspector Phone: _____ Inspector Email: _____

To assist in conducting inspections, please refer to the Inspection Guide and detailed factsheet on Grass Swales that discuss function, structural elements, common maintenance, and examples of maintenance needed located on the city's website. Space for additional notes is provided on Page 3 and additional pages may be attached to the end of this form.

General Basin: Take a picture of the grass swale.

1. Inlets: This grass swale has _____ inlets.

Items to Look For Associated Maintenance Needed	Maintenance Identified
Dirt/trash/debris accumulation Remove accumulated dirt/trash/debris and dispose of it offsite	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Overgrown or woody vegetation Mow, trim, remove unwanted vegetation	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Erosion around inlet Place riprap or other methods to slow down water	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Damage to structure Consult city to determine next steps	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None

Notes (Use this space to specify which inlets need maintenance):

2. Channel and Vegetation:

Items to Look For Associated Maintenance Needed	Maintenance Identified
Erosion in channel Replace eroded soil and reseed eroding areas during appropriate seeding windows (spring and fall).	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Dirt/trash/debris accumulation Remove accumulated dirt/trash/debris from channel and dispose of it offsite.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Vegetation is overgrown Mow as appropriate to maintain positive water flow.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Unhealthy Vegetation Reseed dead grass and mow as appropriate.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Not draining Consult city to determine next steps	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Herbicide/Pesticide Use Minimize use of herbicides and pesticides.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None

Notes:

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3. Outlet Structure: Take a picture of the outlet structure and attach to submittal email.

Items to Look For Associated Maintenance Needed	Maintenance Identified
Trash rack is not attached to structure Reattach trash rack	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Bare ground around outlet structure Revegetate.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Dirt/trash/debris accumulation Remove accumulated dirt/trash/debris and dispose of it offsite	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Damage to structure Consult city to determine next steps	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None

Notes:

4. Other Items of Concern

Items to Look For Associated Maintenance Needed	Maintenance Identified
Bare spots in vegetation Reseed or sod these areas in appropriate seasons	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Accumulation of dirt Remove dirt/trash/debris and dispose of offsite	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Maintenance access concerns Consult city to determine next steps	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Nuisance noticed (odor, insects, other) Investigate cause. Consult city to determine next steps	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
Burrowing animals/pests Consult with city to determine next steps	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None

Notes:

Inspection Completed By:

Printed Name _____

Signature _____

