



## Permanent Stormwater Control Measure (PSCM) | Inspection Form

### Manufactured Treatment Device (MTD) 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 manufactured treatment devices 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 Photo: Take a picture of the overall basin.**

#### Hydrodynamic Separators:

Items to Look For   Associated Maintenance Needed	Maintenance Identified
<b>Dirt/trash/debris blocking inlet</b>   Remove accumulated dirt/trash/debris and dispose of it offsite	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
<b>Dirt/trash/debris accumulation exceeds 75% of capacity</b>   Per manufacturer's instructions, clean out using vactor truck.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
<b>Strong Odor</b>   Consult manufacturer's recommendations. If unable to determine the problem, contact the city.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
<b>Access issue</b>   Ensure access for inspection/vactor truck to maintenance point.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None

**Refer to manufacturer's recommendations for maintenance and any specialized needs for the device.**

Notes:

#### High-Rate Media Filter:

Items to Look For   Associated Maintenance Needed	Maintenance Identified
<b>System is not draining properly</b>   Refer to manufacturer's instructions for proper drain times and maintenance steps to address clogged media.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
<b>Dirt/trash/debris blocking any inlets</b>   Remove accumulated dirt/trash/debris and dispose of it offsite	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None
<b>Access issue</b>   Ensure easy access for inspection and vactor truck to maintenance point.	<input type="checkbox"/> Minor <input type="checkbox"/> Major <input type="checkbox"/> None

**Refer to manufacturer's recommendations for maintenance and any specialized needs for the device.**

Notes:

Manufactured Treatment Devices Inspection Form

**High-Rate Biofilter:**

Items to Look For | Associated Maintenance Needed

Maintenance Identified

**Unhealthy Trees** | Inspect tree health, prune or replace as needed

Minor  Major  None

**Trash and debris on mulch layer** | Remove trash and debris.

Minor  Major  None

**Dirt/trash/debris/leaf litter blocking any inlets** | Remove accumulated dirt/trash/debris and dispose of it offsite

Minor  Major  None

**Mulch is missing** | Refer to manufacturer's recommendations for replacing mulch

Minor  Major  None

**System is not draining properly** | Refer to manufacturer's instructions for proper drain times and maintenance steps to address clogged media.

Minor  Major  None

**Refer to manufacturer's recommendations for maintenance and any specialized needs for the device.**

Notes:

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Inspection Completed By:

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

