

# Town of Kernersville Sand Filter Inspection Form

Report Date: \_\_\_\_\_

Inspection Date: \_\_\_\_\_

SCM Name/Location: \_\_\_\_\_

PASS ☐

FAIL ☐

Note: Items included in this inspection checklist are not an exhaustive list for any particular facility. As each facility is different, the Town looks to the professional inspecting the facility to perform a comprehensive inspection prior to certification.

**Code Key:**

MN = Maintenance Needed

M = Monitor (potential for future problem)

OK = No Maintenance Needed

NA = Not Applicable

Assessment	Code	Comments
------------	------	----------

**SCM and Easement Area**

Trash or debris present		
-------------------------	--	--

**Perimeter**

Bare soil or erosion on side slopes		
Sediment or debris accumulation		
Side slope vegetation maintained		
Other (describe)		

**Inflow, Inlet(s) & Diversion Structure**

Obstruction: vegetation/debris/sediment		
Erosion or undercutting		
Displacement of fabric, rip-rap, aprons, etc.		
Pipe condition: clogged, damaged		
Structural condition (grates, boxes and covers)		
Other (describe)		

**Pretreatment Area**

Access point, ladder/steps		
Sediment (> 6 inches) or debris accumulation		
Erosion		
Invasive vegetation		
Oil or grit present		
Structural condition (baffles, weir, chamber)		
Other (describe)		

**Code Key:**

MN = Maintenance Needed

M = Monitor (potential for future problem)

OK = No Maintenance Needed

NA = Not Applicable

Assessment	Code	Comments
------------	------	----------

**Filter Bed and Underdrain System**

Access point, ladder/steps		
Standing water ( >24 hours after storm event)		
Obstruction: vegetation/debris/sediment		
Oil or grit accumulation		
Invasive vegetation		
Underdrains and orifice condition		
Other (describe)		

**Outlet Device**

Obstruction: vegetation/debris/sediment		
Erosion or undercutting		
Structural condition		
Pipe condition		
Condition of rip-rap, fabric, etc.		
Other (describe)		

**Miscellaneous**

Fence condition		
Signage		
Access		
Vandalism		
Fish or wildlife observations		
Public hazards		
Odors		
Other (describe)		
Other (describe)		

Photo 1: Overall View

Photo 2:

Photo 3:

Photo 4:

**Actions Needed:**

---

---

---

---

---

---

Photo 5:

Photo 6:

Photo 7:

Photo 8:

**Actions Needed:**

---

---

---

---

---

---

**Additional Comments:**

---

---

---

---

---

---

**Inspector** \_\_\_\_\_ **Date** \_\_\_\_\_

**Inspector Signature** \_\_\_\_\_

**Certification**

*(Only completed when SCM is fully functional and has no outstanding repair or maintenance issues)*

☐ I, \_\_\_\_\_,

as a duly registered Professional in the State of North Carolina, hereby attest that I conducted a thorough inspection and that the stormwater control measure is fully functioning and operating as designed and intended.

(Seal)