

ANNUAL SCM INSPECTION REPORT BIORETENTION CELL (SCM103)



102 Town Hall Drive, Leland, NC 28451
www.townofleland.com

Public Works Department
Phone 910-371-0148 Fax 910-371-1073

Project Name: _____

Inspection Date: _____

Permit Number: _____

SCM Location: _____

SCM ID #: _____
(As labeled on Town-approved Plans)

This SCM is currently:

☐ acting as a temporary sediment collection device OR ☐ a permanent SCM

CODE KEY:

N/A = Not Applicable	M = Monitor (potential for future problem)
NP = Not a Problem	WN = Work Needed

INLET DEVICE(s)

Assessment	Code	Explanation
Obstruction: Vegetation/Debris/Sediment		
Erosion/Undercutting		
Displacement of fabric/rip rap		
Pipe Condition		
Other (describe)		

PRETREATMENT AREA

Assessment	Code	Explanation
Accumulation: Vegetation/Debris/Sediment		
Erosion/gullies present		
Invasive Vegetation		
Flow bypassing pretreatment		
Other (describe)		

PERIMETER

Assessment	Code	Explanation
Accumulation: Vegetation/Debris/Sediment		
Bare soils/erosion gullies		
Other (describe)		

BIORETENTION CELL

Assessment	Code	Explanation
Accumulation: Vegetation/Debris/Sediment		
Overgrown vegetation		
Plants are dead/diseased/dying		
Invasive vegetation		
Mulch is broken down/floated away		
Low soil pH/heavy metals accumulation		
Tree stakes/wires present (>6 months after planting)		
Other (describe)		

UNDERDRAIN, FILTER FABRIC ELEMENT, OUTLET SYSTEM

Assessment	Code	Explanation
Obstruction: Vegetation/Debris/Sediment		
Erosion/Undercutting		
Joint failure/loss of joint material		
Leaking Device		
Other (describe)		

MISCELLANEOUS

Assessment	Code	Explanation
Trash/Debris		
Access		
Vandalism		
Fence Condition		
Signage		
Other (describe)		

PHOTOGRAPHS Attach digital photographs of the site and structural control measure(s) including a caption describing the photo.

ADDITIONAL COMMENTS

Inspector Initials: _____