

ANNUAL SCM INSPECTION REPORT LEVEL SPREADER / FILTER STRIP (SCM110)



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/FLOW DIVERSION STRUCTURE

Assessment	Code	Explanation
Obstruction: Vegetation/Debris/Sediment		
Erosion/Undercutting		
Rip rap location/condition		
Structural Condition		
Other (describe)		

FILTER STRIP

Assessment	Code	Explanation
Accumulation: Vegetation/Debris/Sediment		
Plants are dead/diseased/dying		
Vegetation length (too short/long)		
Bare soil/erosion gullies		
Invasive Vegetation		
Other (describe)		

SWALE & LEVEL SPREADER

Assessment	Code	Explanation
Accumulation: Vegetation/Debris/Sediment		
Level Lip Condition		
Erosion/flow bypassing level spreader		
Trees/Shrubs present in swale or downstream side of spreader		
Other (describe)		

BYPASS CHANNEL

Assessment	Code	Explanation
Bare soil/erosion gullies		
Turf Reinforcement Condition		
Displacement of rip rap		
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: _____