



**Subsurface Treatment Feature Inspection Form**

<i>Submit this completed form by June 15<sup>th</sup> each year</i>			
<b>Submit via email:</b> <a href="mailto:Stormwater.SCM@co.slo.ca.us">Stormwater.SCM@co.slo.ca.us</a>		<b>Submit by mail:</b> Attn: Stormwater Manager, Planning & Building 976 Osos St. Room 300 San Luis Obispo, CA 93408	
<b>Inspection Details</b>	Inspection Date:		Inspector Name:
	SCM# Inspected: <i>(SCM numbers are listed on notice of inspection letter)</i>		
	SCM Type: <input type="checkbox"/> Media Filter <input type="checkbox"/> Treatment Vault <input type="checkbox"/> Filtration Device		
	Inspection Type: <input type="checkbox"/> Pre-Rain <input type="checkbox"/> Monthly <input type="checkbox"/> Semi-Annually <input type="checkbox"/> Annually		
<b>System Manufacturer:</b>		<b>Model:</b>	<b>Design Capacity (ft<sup>3</sup>):</b>
<b>Access cover or inspection port:</b>	<input type="checkbox"/> Cover can be opened and closed as designed. No corrosion, deformation or cracking.	<input type="checkbox"/> Cover requires additional equipment for operation. Minor corrosion, deformation or cracking evident.	<input type="checkbox"/> Cover cannot be located or opened for inspection. Corrosion or deformation prevents proper operation.
<b>External Structure:</b>  <input type="checkbox"/> Unknown, not observed.	<input type="checkbox"/> No cracks wider than 0.50" at the joints of any inlet/outlet. No evidence of particles entering the structure through cracks.	<input type="checkbox"/> Minor cracks visible at joints or on surfaces. Cracks may be repaired without significant disturbance.	<input type="checkbox"/> Cracks wider than 0.50" evident at joints or walls. Significant repair required to maintain functionality.
<b>Sediment or particle accumulation:</b>  <input type="checkbox"/> Unknown, not observed.	<input type="checkbox"/> Sediment/particulate accumulation less than 1.0". Clean outs and drains functioning properly.	<input type="checkbox"/> Sediment/particulate accumulation less than 2.0". Clean outs and drains functioning, but require minor maintenance.	<input type="checkbox"/> Sediment/particulate accumulation greater than 2.0". Vault, cleanouts, and drains require maintenance.

## Subsurface Treatment Feature Inspection Form

<p><b>Baffles/Filters (If applicable)</b></p> <p><input type="checkbox"/> Unknown, not observed.</p>	<p><input type="checkbox"/> Baffles or filters in good condition with &gt;50% capacity remaining. No signs of warping, corrosion or failure.</p>	<p><input type="checkbox"/> Baffles or filters showing accumulation, warping or damage. Maintenance should be scheduled.</p>	<p><input type="checkbox"/> Baffles or filters are clogged, warped, corroded, or failing. Immediate maintenance required.</p>
<p><b>Drain Inlets and Outlets: (if applicable)</b></p>	<p><input type="checkbox"/> Drain inlets and outlets are clear of debris. Filters are intact (if applicable). No ponding observed.</p>	<p><input type="checkbox"/> Drain inlets and outlets partially blocked/impaired by sediment, vegetation or debris. Some ponding observed.</p>	<p><input type="checkbox"/> Drain inlets and outlets require maintenance. Debris and sediment must be removed for proper function.</p>
<p><b>Maintenance Records:</b></p>	<p>Has vault clean out been conducted? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Have vault inlets and outlets and filters been maintained? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Have maintenance needs identified by this inspection been scheduled for repair? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p><b>Date that identified maintenance will be completed:</b></p>			
<p><b>Date of last subsurface video inspection and/or maintenance:</b></p>			
<p><b>Additional Notes:</b></p>			
<p>Photographs taken? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Photographs submitted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p><b>If submitting photos via email, please label/name the photo with the SCM number for the photographed stormwater feature. Submission of photos is optional, but encouraged.</b></p>			
<p>For County Use:</p>			
<p>Date Received:</p>	<p>Staff Reviewer</p>	<p>CCM Case#</p>	