



STORMWATER FACILITIES INSPECTION & MAINTENANCE ANNUAL REPORTING FORM for RESIDENTIAL NEIGHBORHOODS

Name of Home Owner Association or Neighborhood Date Form Completed

Main Streets where Stormwater Facilities are Located

Name of Person Completing this Form Title (such as Owner, HOA President, etc.)

Contact Phone Number Email Address (please print clearly)

Instructions for completing this form:

1. Identify your neighborhood's stormwater facilities and inventory them in Part 1 below.
Use your site plan or the descriptions in the Stormwater Facilities Maintenance Guide, available online at cityoflacey.org/privately-owned-stormwater-facilities/
2. Inspect your facilities and check for any damage or other potential problems.
Refer to the appropriate checklists in the Stormwater Facilities Maintenance Guide.
3. Maintain your facilities as needed, as described in the Maintenance Guide.
Do it yourself or with others, form a work party, or hire a qualified contractor.
4. Summarize the current condition of facilities and recent maintenance work, in Part 2.
In the table, check all applicable boxes, circle conditions and write-in any other info.
5. Submit this completed form to the City of Lacey each year by AUGUST 31st.

Mailing Address: Stormwater Maintenance Program
Lacey Water Resources
420 College Street SE, Lacey, WA 98503

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PART 1: FACILITIES INVENTORY

Check the boxes to indicate which facility types you have in your community, and how many.

| <u>Facility Type</u> | <u>Number Within Your Neighborhood</u> | | | | |
|---|--|------------------------------|--------------------------------------|----------------------------|-----------------------------|
| Wet Ponds/Constructed Wetlands | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two or more | | |
| Infiltration Basins ("dry ponds") | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two or more | | |
| Bio-Swales | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two or more | | |
| Bioretention Cells ("rain gardens")..... | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two or more | | |
| Treatment Vaults | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two or more | | |
| Dispersion Trenches | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two or more | | |
| Oil-Water Separators | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two or more | | |
| Catch Basins (private only, not in public road) | <input type="checkbox"/> None | <input type="checkbox"/> One | <input type="checkbox"/> Two | <input type="checkbox"/> 3 | <input type="checkbox"/> 4+ |
| Other Drainage Features: _____ | | | | | |

PART 2: FACILITIES MAINTENANCE

| IDENTIFY | INSPECT | MAINTAIN | OBSERVE |
|---|---|--|---|
| Facility Type & Features | Current Condition (Good, Fair, Poor) | Inspection and Maintenance Accomplished | Problems Noted |
| Wet Pond or Constructed Wetland | | | <input type="checkbox"/> No Problems Noted |
| <i>Inflow System</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Pipe-End Area Cleared | <input type="checkbox"/> Pipe Damage |
| <i>Slopes, Erosion</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Erosion Repaired | <input type="checkbox"/> Erosion |
| <i>Trash & Yard Debris</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Trash/Debris Removed | <input type="checkbox"/> Dumping of waste/debris |
| <i>Cattails/Vegetation</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Cattails/Veg. Removed | <input type="checkbox"/> Excess cattails/plants |
| <i>Impermeable Liner</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Liner completely covered | <input type="checkbox"/> Water Level fluctuates |
| <i>Outflow System</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Grate or Weir Cleared | <input type="checkbox"/> Other: |
| Detention Pond/Infiltration Basin ("Dry Pond") | | | <input type="checkbox"/> No Problems Noted |
| <i>Inflow System</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Pipe-End Area Cleared | <input type="checkbox"/> Pipe Damage |
| <i>Erosion Protection</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> RipRap Restored/Replaced | <input type="checkbox"/> Invasive plant growth |
| <i>Grassy Bottom Area</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Mowed <input type="checkbox"/> Reseeded | <input type="checkbox"/> Not draining well |
| <i>Slopes, Erosion</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Erosion Repaired | <input type="checkbox"/> Erosion <input type="checkbox"/> Moles |
| <i>Trash & Yard Debris</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Trash/Debris Removed | <input type="checkbox"/> Dumping of waste/debris |
| <i>Vegetation on slopes</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Problem Plants Removed | <input type="checkbox"/> Other: |
| Bio-Swale | | | <input type="checkbox"/> No Problems Noted |
| <i>Grass, Vegetation</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Mowed <input type="checkbox"/> Weeded | <input type="checkbox"/> Erosion <input type="checkbox"/> Moles |
| <i>Side Slopes</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Trash/Debris Removed | <input type="checkbox"/> Other: |
| Bioretention Cells (Community RainGardens) | | | <input type="checkbox"/> No Problems Noted |
| <i>Inflow</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Inflow Path Cleared | <input type="checkbox"/> Erosion |
| <i>Mulch and Soil</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Added new mulch | <input type="checkbox"/> Plants not healthy |
| <i>Plants</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Pruned, weeded | <input type="checkbox"/> Other: |
| <i>Overflow Grate</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Grate Area Cleared | |
| Dispersion Trench | | | <input type="checkbox"/> No Problems Noted |
| <i>Inflow System</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Grate/Pipe Cleared | <input type="checkbox"/> Pipe Damage |
| <i>Drainrock</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Rock Restored/Replaced | <input type="checkbox"/> Invasive weed growth |
| <i>Outflow System</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Outflow Clear & Level | <input type="checkbox"/> Erosion |
| <i>Trash and Invasives</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Trash/Weeds Removed | <input type="checkbox"/> Other: |
| Catch Basins (NOT within public roads) | | | <input type="checkbox"/> No Problems Noted |
| <i>Grate</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Grates Cleared-off | <input type="checkbox"/> Grate Damage |
| <i>Sump</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Sumps Cleaned-out | <input type="checkbox"/> Structure Damage |
| <i>Pipe Outlet</i> | <input type="radio"/> G <input type="radio"/> F <input type="radio"/> P | <input type="checkbox"/> Pipe Outlet Cleared | <input type="checkbox"/> Pipe Damage |
| | | | <input type="checkbox"/> Other: |

Who performs the maintenance of your stormwater facilities? Check all that apply:
 Self /Other Owners Maintenance Contractor Other: _____

Notes: _____

Thank you! If you want City staff to contact you for technical assistance, please check this box: