



City of Kings Mountain
 Stormwater Division
 704-734-4501

To be submitted as part of
 the annual report to the City

Rev. 4/2017

Stormwater Pond Inspections and Maintenance Checklist

Site Name: _____ Owner Change since last inspection? Y N

Location: _____

Owner Name: _____

Address: _____ Phone Number: _____

Site Status: _____

Date: _____ Time: _____ Site Conditions: _____

Stormwater Pond Type: Wet Pond ___ Wet ED Pond ___ Micro pool Pond ___ Multiple Pond System ___
 Dry Pond ___

Inspection Frequency Key: A = annual (required); M = monthly (recommended); S = after major storms (recommended)

Inspection Items	Inspection Frequency	Inspected? (Yes/No)	Maintenance Needed? (Yes/No)	Comments/Description
Embankment and Emergency Spillway				
Vegetation healthy?	A/S			
Erosion on embankment?	A/S			
Animal burrow in embankment?	A/S			
Cracking, sliding, bulging of dam?	A/S			
Drains blocked or not functioning?	A/S			
Leaks or seeps on embankment?	A/S			
Slope protection functional?	A/S			
Emergency spillway obstructed?	A/S			
Erosion in/around emergency spillway?	A/S			
Other (describe)	A/S			
Riser and Principal Spillway (describe type; concrete pipe, slotted weir, channel, etc.)				
Low-flow orifice functional?	A/S			
Trash rack (Debris removal needed? Corrosion noted?)	A/S			
Sediment buildup in riser?	A			
Concrete/masonry condition (Cracks or displacement? Spalling?)	A			
Metal pipe in good condition?	A			
Control Valve operation?	A			
Pond drain valve operation?	A			
Outfall channels function, not eroding?	A			
Other (describe)	A			



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Inspection Items	Inspection Frequency	Inspected ? (Yes/No)	Maintenance Needed? (Yes/No)	Comments/Description
Sediment Forebays				
Sediment description				
Sediment cleanout needed (over 50% full?)	A/S			
Permanent Pool Areas (if applicable)				
Undesirable vegetation growth?	A/M			
Visible pollution?	A/M			
Shoreline erosion?	A/M			
Erosion at outfalls into pond?	A/M			
Headwalls and endwalls in good condition?	A/M			
Encroachment into pond or easement area by other activities?	A/M			
Evidence of sediment accumulation?	A			
Dry Pond Areas (if applicable)				
Vegetation adequate?	A/M			
Undesirable vegetation or woody plant growth?	A/M			
Excessive sedimentation?	A			
Hazards				
Have there been complaints from residents?	A/M			
Public Hazards noted?	A/M			

Inspector Comments: _____

Overall Condition of Facility: _____ Acceptable _____ Unacceptable

If any of the above Inspection Items are checked "Yes" for "Maintenance Needed", list Maintenance actions and their completion dates below:

MAINTENANCE ACTION NEEDED	DUE DATE

The next routine inspection is scheduled for approximately: _____
 (date)

Inspected by: (signature) _____ Title: _____

Inspected by: (printed) _____