



Town of Algoma  
 15 N. Oakwood Road  
 Oshkosh, WI 54904  
 Phone: 920.235-3789

## STORMWATER MANAGEMENT SYSTEM INSPECTION, OPERATION, & MAINTENANCE FORM

Site or Subdivision Name:		Parcel ID:		
Site Address / Location:				
Inspection Frequency (check one): <input type="checkbox"/> > 0.5 Inch Rain (R) <input type="checkbox"/> Monthly (M) <input type="checkbox"/> Biannual (B) <input type="checkbox"/> Annual (A) <input type="checkbox"/> 5-Year Cycle (C) <input type="checkbox"/> Other				
Date of Inspection:		Inspector Name:		Maintenance Crew Leader Name:
Maintenance Items – Infiltration Basin (1003)	Frequency	Observed?	Inspector Comments	Maintenance Completed
1. Debris & Litter – At inlets and outlets (grate, orifice, weir, pipe, spillway, etc.)	R,M,B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
2. Debris & Litter – At other device locations (vegetation)	A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
3. Vegetation – Vegetation health or density concern (water, disease, etc.)	M,B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
4. Vegetation – Noxious weed or tree root concern (unauthorized planting, etc.)	A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
5. Wildlife – Burrow holes, fish damage, animal paths, or other concern	A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
6. Erosion – Channel, rill, scour, or other erosion concern	A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
7. Structural inlet or outlet concern (crack, spalling, corrosion, pipe joint, etc.)	A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
8. Structural embankment concern (seeping, settling, slumping, roots, etc.)	R,M,B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
9. Structural spillway concern (dimensions, freeboard, unstable, leaking, etc.)	R,M,B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
10. Backflow preventor or flap gate concern (clogged, missing, etc.)	R,M,B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
11. Level spreader system concern (flow not evenly spread out, etc.)	R,M,B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
12. Clogging or compaction concern (water > 24 to 72 hrs after > 0.5" rain)	R,M,B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
13. Bypass or dewatering system concern (winter/summer operation, etc.)	B,A,C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
14. Sediment accumulation concern (surface storage reduced by > 10%)	C	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes
15. Other (graffiti, illicit discharge, illegal dumping, etc.):		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes