



Operation and Maintenance Checklist Enhanced Swales, Grass Channels, and Filter Strips

Site Name _____ Address: _____

Inspector: _____ Phone: _____ Date: _____

Last rain: _____ Site conditions: _____

A checklist for maintaining the condition of swales, grass channels and filter strips, as part of a stormwater management system.

A/M/S = how often to inspect = Initially, Annually, Quarterly, Monthly, or after a major Storm

U = item inspected; needs attention/repair S = item was inspected; condition satisfactory - = not inspected

Inspection Items	A/M/ S	U	S	Comments
<i>Trash and Other Debris</i>				
Leaves or brush blocking parts of system?	M/S			
Dumping of yard wastes into facility?	M			
Disturbed soil uphill of swale; leading to erosion and sediment wash into system?	M			
Trash/litter present or blocking parts of system?	M			
<i>Vegetation</i>				
Grass is being maintained 3-4 inches minimum?	M			
Grass is stable and covers bed and bank as planned?	M			
Grasses and other plants according to plan?	I			
Fertilizer application is being kept to a minimum?	Q			
Weeds or other lack of maintenance?	M			
Mulch is being placed in flow line?	M			
Weeding or mowing equipment is cutting into soil leading to unnecessary erosion/loss of soil.	M			
Plant stress from inadequate watering?	M			
Dead or diseased plants present?	M			
<i>Filtration capacity</i>				
Is grass clogged with oil, grease, other pollution?	M			
Are depressions or sinkholes forming in system?	Q			
Facility should dewater between storms.	M			
<i>Check dams / energy dissipators / sumps</i>				
Evidence of sedimentation buildup?	A,S			
Sumps greater than 50% full of sediment?	A,S			

Trash or blockages at weirs or weep holes?	M			
Is there bypassing or undercutting at check dams?	A, S			
Evidence of erosion at downstream toe of drop structures?	A,S			
<i>Deposits of sediment</i>				
Is swale/system clear of sediment deposits?	Q			
Sediments (should be) less than 20% of swale design depth?	A			
<i>Outlets / overflow spillway</i>				
In good condition?	A,S			
Evidence of erosion?	A, S			
Has facility been filled or blocked inappropriately?	A,S			
<i>Hazards and access</i>				
Have there been complaints from residents/public?	M			
Are maintenance accesses free of hazards and fully operational?	Q			
Any hazards to public to note?	Q			

Keep record of your inspections and corrective actions. Use this maintenance checklist to collect information for your annual maintenance report.

What maintenance has recently been completed?

Note sediment removed from control. Quantity (lb): _____ lb Date: _____

Inspector recommends the following maintenance or repair:

Dates any maintenance needs to be completed by:

Inspector's printed name

Initialed

Date