Site ID/Name: _____ Location: _____ Inspector: _____ Date: _____

Vegetated Filter Strip

Good Examples:

Examples of Potential Issues:

12 Erosion &
20 Plant Health (Poor; >50%)

12 Erosion &
20 Plant Health (Fair; 25-50%)

18 Debris (Poor; >25%)

General Inspection Questions (YES / NO) *Note: 'Yes' indicates a maintenance need and action*

General:

1. Is access to the site inadequately maintained for inspection and maintenance?	YES / NO
2. Are grass clippings present in the drainage area or within the system [inlet structure, pretreatment, main treatment, and outlet structure]? (Note: grass clippings should be removed	YES / NO

Drainage Area (*pertains to the surrounding landscape that contributes runoff to the practice*)

3. Is there any exposed or unstable soil that could cause sediment accumulation within the practice?	YES / NO
4. Do the drainage ways (overland flow or pipes) to the practice have trash, debris, large branches, etc. present?	YES / NO

Inlet Structure / Pretreatment:

5. Is there presence of cracks or structural damage in concrete trough for pea gravel diaphragm or other level or flow spreader?	YES / NO
6. Does this area have trash, debris, and sediment present?	YES / NO
7. Is there evidence of runoff short-circuiting (going around) the filter?	YES / NO
8. Is there evidence of gullies, rills, or erosion around the inlet or pre-treatment structure?	YES / NO
9. Does the area around the inlet structure need to be mowed?	YES / NO
10. If a diversion structure (high flow bypass structure or overflow spillway) is present, is there presence of trash, debris, or sediment?	YES / NO

Main Treatment:

11. Is the grass between 3-12 inches, or between 6-15 inches along a roadway?	YES / NO
12. Is there evidence of gullies, rills, or erosion in the filter?	YES / NO
13. Has sediment accumulated in the filter?	YES / NO
14. Is there evidence of long-term ponding or standing water in the practice? (e.g., stains, odors, mosquito larvae, etc.)	YES / NO
15. Is there any evidence of fertilizer use on plants (e.g., fertilizer crusting on surface of soil, tips of leaves turning brown or yellow, blackened roots, etc.)	YES / NO

Outlet Structure:

16. Do these structures have trash, debris, or sediment present?	YES / NO
17. Is there evidence of erosion, scour, or flooding around the structure?	YES / NO

Qualitative Inspection Questions (GOOD /MARGINAL / POOR)
Note: 'Poor' indicates a maintenance need and action

18. Rate the presence of debris (e.g., leaves or trash) in the filter.	GOOD (<10%) MARGINAL (10-25%) POOR (>25%)
19. Rate the presence of undesirable vegetation (e.g., unwanted or invasive).	GOOD (<25%) MARGINAL (25-50%) POOR (>50%)
20. Rate the condition of plant health (percentages indicate dying/stressed).	GOOD (<25%) MARGINAL (25-50%) POOR (>50%)

Comments: _____

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