## **Bioretention Maintenance Form**

Site Name:		
Location:	Owner:	
Contact Information: (Name, Address, Phone #, Email)		
Inspection Date:	Inspection By:	

Inspection Date:		Inspection By:	
Inspection Activity	Maintenance Needed	Description of Required Maintenance Activity	Date Maintenance Completed
Control weeds (remove manually by hand or mowing)			
Remove debris/trash as needed			
Check any inlet/outlet pipes for clogging			
Ensure any cleanout pipes remain watertight			
Cut back plants as appropriate and replace plants as needed			
Check for standing water issues (< 48 hrs. after rainfall event)			
Check area for signs of erosion			
Check for accumulated sediment, remove as needed			
If irrigated, check for any necessary repairs (drain irrigation line in Fall)			
Other (miscellaneous)			