



Metro Nashville Stormwater Control Measure (SCM) Inspection Report for  
 Underground Water Quality Units (WQU)

**WQU Site Information**

<b>Grading Permit Number</b>	
<b>Site Address</b>	
<b>Owner/ Responsible Party Name</b>	
<b>Owner Contact Phone</b>	
<b>Owner Contact Email</b>	
<b>Date of LAST inspection</b>	

**Inspector Information**

<b>Date of CURRENT inspection</b>	
<b>Name of Inspector</b>	
<b>Are you a third party inspector?</b>	Y / N If Yes, company contact :
<b>Are you following any applicable Confined Space Entry requirements<sup>1</sup>?</b>	

**Document Review**

*Review associated documentation for the WQU, noting any differences with what you find on site.*

**Long Term Maintenance Plan:** Reviewed Y / N \_\_\_\_\_

**As-built plans:** Reviewed Y /N \_\_\_\_\_

**Manufacturer's Maintenance Recommendations:** Reviewed Y / N \_\_\_\_\_

**Last inspection report:** Have previously noted maintenance needs been addressed? Y /N

Comments: \_\_\_\_\_

\_\_\_\_\_

<sup>1</sup>Please see <https://www.osha.gov/Publications/osha3138.pdf> for more information.



**Water Quality Unit/ Proprietary Device Inspection Checklist**

Complete one checklist per stormwater control measure. Submit checklists together per site.

**WQU Make and Model:** \_\_\_\_\_

Number of Filter Cartridges, if present: \_\_\_\_\_

**Date of Last Rain:** \_\_\_\_\_

Please note whether feature is satisfactory, unsatisfactory or non-functioning. Clarify with your own comments. Note locations of photographs.

Feature		Comments
Inlet structure stable?	Y / N	
Trash rack free of debris?	Y / N	
Area draining to WQU stable?	Y / N	
Outlet Structure stable?	Y / N	
Downstream of discharge point stable?	Y / N	
Is there associated Underground Detention?	Y / N	
<b>Depth of accumulated sediment (note inches or feet)</b>		
<b>Depth of accumulated sediment in underground detention (note inches or feet)</b>		
<b>Manufacturer's recommended pump-out volume/ sediment depth</b>		
<b>Total volume of sludge removed if (Attach copy of waste manifest for disposal)</b>		

General Comments:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date of Next Inspection: \_\_\_\_\_

**Inspector's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_