## 20\_\_\_ Maintenance Log for Stormwater Management Facilities

Name of Facility:						Submission for: (Select One)  1st Quarter				
Location/Address:						☐ 2nd Quarter				
						☐ 3rd Quarter				
Franklin ID #:						☐ 4th Quarter				
					•					
BIORETENTION BASIN										
Date:										
Preventative Maintenance (X):Completed										
_awn/Vegetative Area:										
Cutting										
Maintenance										
Pest Control										
Planted Bottom										
Trash and Debris removal:										
Trash rack/outlets										
Underdrains										
Inlets										
Slopes/Ramps										
Rip-Rap										
Sediment Removal:										
Trash rack/Outlets										
Underdrains										
Inlets										
Slopes/Ramps										
Rip Rap										
Mechanical Components:										
Fence Gates/Locks										
Other										
				<u>L</u>						
Corrective Maintenance										
Structural Repair										
ence Repair										
Frosion Repair										
Other										
Comments:										
(indicate any repairs which were completed)										