

## Grassed Swale Operation and Maintenance Agreement

I will keep a maintenance record on this SCM. This maintenance record will be kept in a log in a known set location. Any deficient SCM elements noted in the inspection will be corrected, repaired or replaced **immediately**. These deficiencies can affect the integrity of structures, safety of the public, and the pollutant removal efficiency of the SCM.

Important maintenance procedures:

- The drainage area of the grassed swale will be carefully managed to reduce the sediment load to the grassed swale.
- After the first-time fertilization to establish the grass in the swale, fertilizer will not be applied to the grassed swale.

The grassed swale will be inspected **once a quarter**. Records of operation and maintenance will be kept in a known set location and will be available upon request.

Inspection activities shall be performed as follows. Any problems that are found shall be repaired immediately.

SCM element:	Potential problem:	How to remediate the problem:
<b>The perimeter of the SCM</b>	Areas of bare soil and/or erosive gullies have formed.	Regrade the soil if necessary, to remove the gully, and then plant a ground cover and water until it is established.
	Vegetation is too short or too long.	Maintain vegetation at a height of approximately six inches.
<b>The entire length of the swale</b>	Trash/debris is present.	Remove the trash/debris.
	Areas of bare soil and/or erosive gullies have formed.	Regrade the soil if necessary, to remove the gully, and then re-sod (or plant with other appropriate species) and water until established. Provide lime and a one-time fertilizer application.
	Sediment covers the grass at the bottom of the swale.	Remove sediment and dispose in an area that will not impact streams or SCMs. Re-sod if necessary.
	Vegetation is too short or too long.	Maintain vegetation at a height of approximately six inches.
<b>The receiving water</b>	Erosion or other signs of damage have occurred at the outlet.	Contact the NC Division of Water Quality 401 Oversight Unit at 919-733-1786.

Permit Number: \_\_\_\_\_  
(to be provided by City of Wilmington)

I acknowledge and agree by my signature below that I am responsible for the performance of the maintenance procedures listed above. I agree to notify the City of Wilmington of any problems with the system or prior to any changes to the system or responsible party.

Project name: \_\_\_\_\_

BMP drainage basin number: \_\_\_\_\_

Print name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

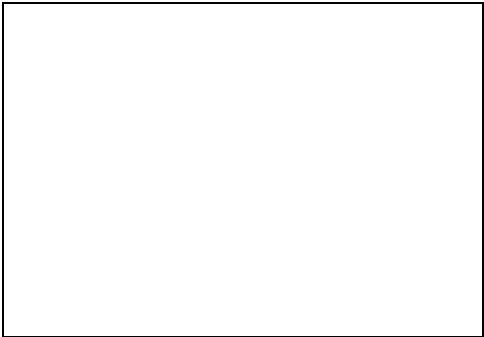
Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Note: The legally responsible party should not be a homeowners' association unless more than 50% of the lots have been sold and a resident of the subdivision has been named the president.

I, \_\_\_\_\_, a Notary Public for the State of \_\_\_\_\_, County of \_\_\_\_\_, do hereby certify that \_\_\_\_\_ personally appeared before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, and acknowledge the due execution of the forgoing grassed swale maintenance requirements. Witness my hand and official seal,



SEAL

My commission expires \_\_\_\_\_