

ADDENDUM _____
 INFILTRATION TRENCH
 STORMWATER BEST MANAGEMENT PRACTICE
 MINIMUM MAINTENANCE MEASURES

Project Name: _____

I will keep a maintenance record on this BMP. This maintenance record will be kept in a log in a known set location. Any deficient BMP 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 removal efficiency of the BMP.

Important operation and maintenance procedures:

- The drainage area of the infiltration trench will be carefully managed to reduce the sediment load to the sand filter.
- The water level in the monitoring wells will be recorded once a month and after every storm event greater than 1.0 inches

The infiltration trench will be inspected **once a quarter and within 24 hours after every storm event greater than 1.0 inches**. 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 immediate

| BMP element: | Potential problem: | How I will remediate the problem: |
|--|---|--|
| The entire BMP | Trash/debris is present. | Remove the trash/debris. |
| The grass filter strip or other pretreatment area | 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. Provide lime and a one-time fertilizer application. |
| | Sediment has accumulated to a depth of greater than six inches. | Search for the source of the sediment and remedy the problem if possible. Remove the sediment and dispose of it in a location where it will not cause impacts to streams or the BMP. |
| The flow diversion structure (if applicable) | The structure is clogged. | Unclog the conveyance and dispose of any sediment off-site. |
| | The structure is damaged. | Make any necessary repairs or replace if damage is too large for repair. |

| BMP element: | Potential problem: | How I will remediate the problem: |
|------------------------------------|--|--|
| The trench | Water is ponding on the surface for more than 24 hours after a storm. | Remove the accumulated sediment from the infiltration system and dispose in a location that will not impact a stream or the BMP. |
| | The depth in the trench is reduced to 75% of the original design depth. | Remove the accumulated sediment from the infiltration system and dispose in a location that will not impact a stream or the BMP. |
| | Grass or other plants are growing on the surface of the trench. | Remove the plants, preferably by hand. If herbicide is used, wipe it on the plants rather than spraying. |
| The observation well(s) | The water table is within one foot of the bottom of the system for a period of three consecutive months. | Contact the DWQ Stormwater Unit immediately at 919-733-5083. |
| | The outflow pipe is clogged. | Provide additional erosion protection such as reinforced turf matting or riprap if needed to prevent future erosion problems. |
| | The outflow pipe is damaged. | Repair or replace the pipe. |
| The emergency overflow berm | Erosion or other signs of damage have occurred at the outlet. | The emergency overflow berm will be repaired or replaced if beyond repair. |
| The receiving water | 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. |

I, _____, hereby acknowledge that I am the financially responsible party for maintenance of this stormwater BMP. I will perform the maintenance as outlined above, in compliance with the requirements of the Town of Spring Lake's Phase II Stormwater Ordinance.

Signature: _____ Date: _____

STATE OF NORTH CAROLINA
COUNTY OF _____

I, _____, a Notary Public of _____ County, in the State of North Carolina, do hereby certify that _____ personally appeared before me this day and acknowledged the execution of the foregoing instrument.

Witness my hand and seal, this _____ day of _____, 20____.

(SEAL)

Notary Public

My Commission Expires: _____