

3rd Party Construction Inspection Checklist and Certification:
Hydrodynamic Manufactured Devices
DEQ Clearinghouse & PFM 6-1321

Project Name:_____Construction Firm:_____

Co. Plan Number:_____3rd Party Inspection Firm:_____

Site Address:_____3rd Party Inspector's Name:_____

Latitude / Longitude:_____°N _____°WContact Info / Phone Number:_____

BMP ID Number as shown on plan and general location on the site:_____

- A certification is required for all SWM/BMP facilities under PFM 6-1300 et. seq.
- A Virginia licensed professional engineer or licensed professional meeting the exemption requirements of the Code of Virginia §54.1-401 must sign the certification at the end of this checklist.

Instructions:

- Check each item as complete, or write in "N/A" for those items that are not applicable.
- Fill in blanks for requested information on dimensions, materials, etc.
- Provide one or more photos for applicable items; checkboxes indicate items that require photos.

Hydrodynamic Manufactured Devices

CHECK	PHOTO	DESCRIPTION	DATE OF INSPECTION / COMMENTS
<input type="checkbox"/>		Pre-Installation Meeting with - contractor designated to install the facility - 3rd party inspector (or designee) - assigned County site inspector A review of checklist and tentative schedule for interim inspections and sign-offs has been discussed	
<input type="checkbox"/>	<input type="checkbox"/>	MTD Manufacturer: _____ MTD Name / Model: _____	
<input type="checkbox"/>		All sediment, debris, greases and oils were removed from the device once site was fully stabilized.	
<input type="checkbox"/>		Inflow pipe: Material: _____ Diameter: _____ in. Invert-in elev. (if accessible) _____ Connection to BMP structure is in accordance with manufacturer's specification, type of connection: _____	
<input type="checkbox"/>		Outflow pipe: Material: _____ Diameter: _____ in. Invert-out elev. (if accessible) _____ Connection to BMP structure is in accordance with manufacturer's specification, type of connection: _____	
<input type="checkbox"/>	<input type="checkbox"/>	Overflow Bypass was constructed per the approved plans Y _____ N _____	
<input type="checkbox"/>	<input type="checkbox"/>	Provide photo of installed BMP before placement of backfill	

Final Certification

I do hereby certify that this as-built information for the stormwater management/BMP facility was inspected by me (or by an individual under my responsible charge) and conforms to the approved plans, except as indicated.

Signature:_____Date:_____

License Number (Seal):_____

("Certify" means to state or declare a professional opinion based on sufficient and appropriate onsite inspections and material tests conducted during construction)