Inspector:		Inspector Certification Number:	Permit Number:		Permit Effective Date:
Project Name:		Permit Holder:	Permit drawings have been reviewed:	Y/N Multiple BMI	P types in system: Y/N
Addition photos attached:	Y/N	Compliance Activity record attached: Y	//N Approximate time sinc	e last rain: < 24 h	24-48 h >48 h
Inspection Date:	Time:	Date of Last Inspection	Approximate size of las	st rain: <0.5 in.	0.5-1.0 in. > 1 in.
Green Root	F				

respectively, unless otherwise specified. Note: 'U' typically indicates maintenance is needed			
Site Access:			
	1.	Site accessible for inspection (if yes, check 'S')	
De		S Cleanout: Vegetated area clear of debris that may impair function (if not, check 'U')	S U
Vegetation:			sυ
	4. 5. 6.	Presence of weeds or invasive plants: Plant health regarding nutrient deficiency or disease Condition of planted areas (adequate coverage, no need for replanting) Moisture condition of plants (no signs of drought or stress) Growth and maintenance of plants:	
Structural:			sυ
	9.	Condition of constructed elements Evidence of roof leaks (If yes, check 'U') Evidence of exposed or actively eroding areas (If yes, check 'U')	

All questions are either 'S' or 'U' for satisfactory/unsatisfactory,

Outlet(s)/emergency overflow:	sυ
11. Outlet(s) condition12. Condition of the area around outlets in terms of erosion or flooding:	
13. Functionality of outlets and drains (e.g., no bypassing, properly connected gutters and downspouts)	
14. Cleanliness and obstruction-free status of overflow structures and gutters	
Inlets/Catchments:	sυ
 15. Inlet(s) condition 16. Evidence of erosion that may impair function (If yes, check 'U') 	
17. Evidence of clogging (If yes, check 'U')	
Dispersal system/sprinkler if present:	SU
 18. Dispersal system/sprinkler functioning as intended 19. Piping in good repair 20. Pumps functioning as intended 21. Cistern tank functioning as intended 22. Overflow functioning as intended 	
Dewatering:	sυ
23. Recover time between storms 24. Evidence of ponding or inundation (if yes, check 'U)	





Greenroof Area (if appropriate; pertains to the areas that SU contributes runoff to the greenroof):

- 25. Evidence of exposed or actively eroding areas (If yes, check 'U')
- 26. Evidence of standing water (If yes, check 'U')
 - a. If so, _____ in.
- 27. Evidence of prolonged storage or wetness (If yes, check 'U'. Storage not draining between storms; plant responses)?

Qualitative inspection:

28. Rate the presence of debris (e.g. leaves, trash, grass clippings) in the green roof surface area.

<25%	25-50%	>50%	

29. Presence of undesirable vegetation.

<25%	25-50%	>50%

- \square
- 30. Rate the plant health per landscaping plan and site objectives. (Dying/stressed)

25-50% >50% <25%

- 31. Rate the plant density per landscaping plan and site objectives. (Vegetation coverage)

>50%	25-50%	<25%

Scan QR code for examples of potential issues:

