|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please fill out and sign the following form and return to [Name] at [Address] within [timeframe]. Under this property’s [Site Plan] Approval granted by the [Town/City of X], you are required to report annually on inspection and maintenance (I&M) activities related to stormwater management features on your property. These required I&M activities can be referenced in the property’s I&M Plan, which was submitted with this property’s [Site Plan Approval] application and approved by the [Town/City]. The purpose of this requirement is to ensure each property’s stormwater management features are operating as designed so that surrounding land and water resources are protected from flooding and pollution. Non-compliance with this requirement can result in enforcement actions such as [insert enforcement actions listed in Ordinance/regs, e.g., fines of up to $300 per day], as outlined in the [Town/City’s Stormwater Management Ordinance/Site Plan Regulations (Chapter X)] and associated project approval conditions, as well as RSA Chapter 676, Section 17. | | | | | | | | | | | | | | | | | | | | |
| **PROPERTY OWNER** | | | | | | | | | | | | | | | | | | | | |
| Name | |  | | | | Organization | | | | | |  | | | | | | | | |
| Address | |  | | | | | | | | | | | | | | | | | | |
| City/State/Zip | |  | | | | | | | | | | | | | | | | | | |
| Phone | |  | | | | Email | |  | | | | | | | | | | | |
| **I&M RESPONSIBLE PARTY** | | | | | | | | | | | | | | | | | | | | |
| Name | |  | | | | Organization | | | | |  | | | | | | | | | |
| Address | |  | | | | | | | | | | | | | | | | | | |
| City/State/Zip | |  | | | | | | | | | | | | | | | | | | |
| Phone | |  | | | | Email | |  | | | | | | | | | | | |
| **PROPERTY INFORMATION** | | | | | | | | | | | | | | | | | | | | |
| Property Name | |  | | | | | | | | | | | | | | | | | | |
| Approval ID | |  | | | | Parcel ID | | | |  | | | | | | | | | | |
| Address | |  | | | | | | | | | | | | | | | | | | |
| City/State/Zip | |  | | | | | | | | | | | | | | | | | | |
| Has owner changed since site plan approval? | | | | Yes | No | | | | | | | | | | | | | | | |
| If answer above is yes, what was date of ownership transfer (MM/DD/YY)? | | | | | | | | | | | | | |  | | | | | | |
| Describe changes on site in past year (include construction, site improvement, renovation, property sale, etc.). | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| Are all stormwater treatment measures included in the I&M Plan still in operation? | | | | | | | | | | | | | | | | | Yes | | No | |
| If answer above is no, please describe. | | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| Have stormwater treatment measures been inspected in the past year? | | | | | | | | | | | | | | | Yes | | | | No | |
| Did any stormwater treatment measures need to be repaired or rehabilitated? | | | | | | | | | | | | | | | Yes | | | | No | |
| If answer above is yes, describe work completed to repair or rehabilitate stormwater treatment measures. If work is not yet complete, describe planned work, including schedule for completion. | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| What routine maintenance was performed? Check all that apply. | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| Mowing | | | | | | Organic debris removal | | | | | | | | | | | | | | |
| Vegetation Management (e.g., invasive plant removal) | | | | | | Trash removal | | | | | | | | | | | | | | |
| Re-establishing vegetation (e.g., seeding, planting) | | | | | | Sediment removal | | | | | | | | | | | | | | |
| What other routine maintenance has been completed or is planned? | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | | | | | | |
| Please attach all inspection logs, photos, maintenance records (if applicable), and the site’s I&M Plan if it has been revised since site plan approval. Indicate attachments below. | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| Inspection logs (required) | | | | | | | | | | | | | | | | | | | | |
| Photos (required) | | | | | | | | | | | | | | | | | | | | |
| Maintenance records (if applicable) | | | | | | | | | | | | | | | | | | | | |
| Revised I&M Plan (if applicable) | | | | | | | | | | | | | | | | | | | | |
| Other | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| Does winter maintenance at this property include the use of road salt? | | | | | | | | | | | | | Yes | | | No | | | | |
| If professionals are hired for salting, are they Green SnowPro certified? | | | | | | | | | | | | | Yes | | | No | | NA- no one hired | | |
| Salt is a pollutant. Have you seen NH DES’s Road Salt Reduction website? | | | | | | | | | | | | | Yes | | | No | | | | |
| Learn more about practices to minimize salt pollution at: <https://www.des.nh.gov/land/roads/road-salt-reduction> | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **I certify that the information in this form and all attachments is true and correct to the best of my knowledge.** | | | | | | | | | | | | | | | | | | | | |
| **Signature** |  | | | | | | **Date** | |  | | | | | | | | | | | |