

TERMINATION INSPECTION CHECKLIST AND COMPLIANCE ASSESSMENT

(To Be Completed by City of Bluffton or designee)

1. Compliance Requirements

All construction sites shall undergo a final inspection by the City of Bluffton or designee prior to submittal of a Notice of Termination (NOT) to IDEM by the project owner to document the site is stabilized, temporary BMPs have been removed and no future land disturbance will occur within the permitted boundaries. A completed copy of this form confirming compliance with project termination requirements, signed by the City of Bluffton or designee representative, is required to be sent by the applicant to IDEM along with the NOT.

2. Inspection Details

Project Name:	
Address/Lot #:	
IDEM Permit No. ("INR" followed by 6 digits):	
Inspection Performed By:	Date:

3. Notice of Termination (NOT) Verification Inspection Items

ITEM	YES	NO	N/A
A. Have all earth disturbing activities been completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Are all soils stabilized as appropriate?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Are all drainageways stabilized with either vegetation, rip rap, or other armament?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Have all temporary erosion and sediment control measures been removed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Has all construction waste, trash, and debris been removed from the site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Has all construction equipment and material been removed from the site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Are all the permanent BMPs free of sediment accumulation resulting from construction activities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Corrective Actions Required (If Applicable)

If you answered "no" to any of the above questions, describe any corrective action which must be taken to remedy the problem and when the corrective actions are to be completed.

Attach additional sheet(s) if needed

5. Compliance Assessment

<input type="checkbox"/> DEFICIENT – Applicant must schedule a re-inspection by City of Bluffton after deficiencies are addressed.
<input type="checkbox"/> COMPLIANT – Applicant must upload a signed copy to IDEM along with the IDEM NOT online submittal.

6. Certification and Signature

Inspector Name and Title:	Phone:
Inspector Signature:	Date:

CERTIFICATE OF COMPLETION & COMPLIANCE

Name of project: _____

Address of premises on which land alteration was accomplished: _____

Inspection Date(s): _____ Stormwater Permit Number: _____

Relative to plans prepared by: _____ on _____ (date)

I hereby certify that:

1. I am familiar with drainage requirements applicable to such land alteration (as set forth in the Construction and Post-Construction Stormwater Management Ordinance of City of Bluffton); and
2. I (or a person under my direct supervision) have personally inspected the completed work and examined the drainage permit and its conditions, as-built plans, and final drainage calculations consistent with as-built conditions performed pursuant to the above referenced drainage permit; and
3. To the best of my knowledge, information, and belief, such land alteration has been performed and completed in conformity with all such drainage requirements, except

Signature: _____ Date: _____

Typed or Printed Name: _____ Phone: _____
() _____

(SEAL)