

**LINCOLN COUNTY GEORGIA  
BMP INSPECTION FORM BASED ON THE GEORGIA  
UNIFORM CODING SYSTEM  
FOR SOIL EROSION AND SEDIMENT CONTROL PRACTICES**

**General Information**

<b>Project Name</b>			
<b>Project Number</b>		<b>Location</b>	
<b>Date of Inspection</b>		<b>Start/End Time</b>	
<b>Inspector's Name</b>			
<b>Inspector Qualification(s)</b>			
<b>Inspector's Contact Information</b>			
<b>Describe present phase of construction</b>			

**Weather Information**

<b>Has it rained since the last inspection?</b>			
<b>Date and time of rain event</b>			
<b>Approximate duration of event</b>			
<b>Approximate rainfall total in inches</b>			
<b>Weather at time of inspection</b>			
<b>Do you suspect that any discharges may have occurred since the last inspection?</b>			
<b>Are there any discharges at the time of the inspection?</b>			

**STRUCTURAL PRACTICES**

CODE	PRACTICE	PASS	FAIL	N/A	OBSERVATIONS/CORRECTIVE ACTIONS DUE
<b>Cd</b>	Check Dam				
<b>Ch</b>	Channel Stabilization				
<b>Co</b>	CONSTRUCTION EXIT				

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CODE	PRACTICE	PASS	FAIL	N/A	OBSERVATIONS/CORRECTIVE ACTIONS DUE
<b>Cr</b>	CONSTRUCTION ROAD STABILIZATION				
<b>Dc</b>	STREAM DIVERSION CHANNEL				
<b>Di</b>	DIVERSION				
<b>Dn1</b>	TEMPORARY DOWN DRAIN STRUCTURE				
<b>Dn2</b>	PERMANENT DOWN DRAIN STRUCTURE				
<b>Fr</b>	FILTER RING				
<b>Ga</b>	GABION				
<b>Gr</b>	GRADE STABILIZATION STRUCTURE				

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CODE	PRACTICE	PASS	FAIL	N/A	OBSERVATIONS/CORRECTIVE ACTIONS DUE
<b>Lv</b>	LEVEL SPREADER				
<b>Rd</b>	ROCK FILTER DAM				
<b>Rt</b>	RETAINING WALL				
<b>Sd1</b>	SEDIMENT BARRIER				
<b>Sd2</b>	INLET SEDIMENT TRAP				
<b>Sd3</b>	TEMPORARY SEDIMENT BASIN				
<b>Sr</b>	TEMPORARY STREAM CROSSING				
<b>St</b>	STORM DRAIN OUTLET PROTECTION				

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CODE	PRACTICE	PASS	FAIL	N/A	OBSERVATIONS/CORRECTIVE ACTIONS DUE
<b>Su</b>	SURFACE ROUGHENING				
<b> Tp</b>	TOP SOILING				
<b>Wt</b>	VEGETATED WATERWAY OR STORM WATER CONVEYANCE CHANNEL				
<b>Sd1-C</b>	TYPE C SILT FENCE				
<b>OTHER</b>					

**VEGETATIVE MEASURES**

CODE	PRACTICE	PASS	FAIL	N/A	OBSERVATIONS/CORRECTIVE ACTIONS DUE
<b>Bf</b>	BUFFER ZONE				
<b>Cs</b>	COASTAL DUNE STABILIZATION (WITH VEGETATION)				

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CODE	PRACTICE	PASS	FAIL	N/A	OBSERVATIONS/CORRECTIVE ACTIONS DUE
<b>Ds1</b>	DISTURBED AREA STABILIZATION (MULCH ONLY)				
<b>Ds2</b>	DISTURBED AREA STABILIZATION (WITH TEMP. SEEDING)				
<b>Ds3</b>	DISTURBED AREA STABILIZATION (WITH PERM. VEGETATION)				
<b>Ds4</b>	DISTURBED AREA STABILIZATION (WITH SOD)				
<b>Du</b>	DUST CONTROL ON DISTURBED AREAS				
<b>Mb</b>	EROSION CONTROL MATTING AND BLANKETS				
<b>Pm</b>	POLYACRYLAMIDE				
<b>Sb</b>	STREAM BANK STABILIZATION (USING PERM. VEGETATION)				

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CODE	PRACTICE	PASS	FAIL	N/A	OBSERVATIONS/CORRECTIVE ACTIONS DUE
<b>Tb</b>	TACKIFIERS AND BINDERS				
<b>Other</b>					

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IS THIS SITE IN COMPLIANCE WITH THE EROSION CONTROL PLANS?

YES       NO

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REMARKS: **Corrective actions due:** Corrective actions must be completed within five working days of receipt of this report. {Code of Lincoln County Chapter 30 Section 30-37(Ord. No. 16 § VII, 5-13-2004} [Click here to enter text.](#)

**INSPECTOR DECLARATION:** I certify that I have personally conducted this inspection. Based upon my observations during the inspection, I certify that to the best of my knowledge and belief, based on the information available to me, this inspection report is true, factual, and correct. I have reviewed inspection reports previous to this one and I certify that, based upon that review, all Action Items noted as necessary have been Remediated except as otherwise noted in this report.

Inspector Name: [Click here to enter text.](#)

Inspector Signature: \_\_\_\_\_

Date: