

# Outfall Inspection Form

This checklist is designed for existing outfalls and is to be used in conjunction with the current report for the outfall being inspected.

Inspected By: \_\_\_\_\_

Date of Inspection: \_\_\_\_\_

Receiving Water Body: \_\_\_\_\_

Outfall ID: \_\_\_\_\_

YES NO N/A

Outfall location is mapped accurately.

Municipal ID is correct.

Physical attributes (pipe size, diameter, material, etc.) are correct.

Inspection conducted under dry conditions.

Outfall is discharging.

Outfall discharge has odor present? Describe: \_\_\_\_\_

Outfall discharge has color, foaming, etc. Describe: \_\_\_\_\_

Outfall discharge has floatables (i.e. trash, foam, etc.) Describe: \_\_\_\_\_

Outfall structure is damaged. Describe: \_\_\_\_\_

Outfall structure has staining. Describe: \_\_\_\_\_

Outfall requires maintenance. Describe: \_\_\_\_\_

Outfall requires sampling, further investigation.

Outfall update request will be submitted. Describe: \_\_\_\_\_

Comments: