

Erosion and Sediment Control Monitoring Checklist

Project Details

Project Name:

Location:

Date:

Time:

Weather Conditions:

Site Details

Inspector Name:

Contact:

Area Inspected:

Checklist

Item	Yes	No	N/A	Comments/Actions Required
Perimeter controls in place and functioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Stabilized construction entrance maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Stockpiles protected from erosion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Drainage inlets protected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Stabilized exposed soil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Good housekeeping on site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Waste and materials properly stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Other:				<div></div>

Additional Observations/Notes

Follow-up Actions Required

Inspector Signature