EXTENSION REQUEST FORM

Property Representative Page

This page (1) should be completed by the property representative. This form (2 pages), and any supporting documents must be submitted as a single PDF attachment to scminspections@raleighnc.gov. Once received, staff will review the submittal to ensure all requested information is included, and notify the requesting party of acceptance or not.

Site Na	me:											
Site Ad	dres	s:										
N-file #: _ N-			An	Anniversary Date:			Has this date passed? [] YES [] NO					
Name of	f Pro	perty Owr	ner/Representa	tive com	pleting form:							
Email: Best Phone #:												
Rela	tion	ship to S	<u>ite</u> :									
	[]	Property	Owner	[] HOA Member		[] Other;					
	[]	Property	Manager	[] Tenant							
(Part 1)	- Re	eason for	requesting ar	n extens	sion (must selec	t one):						
		•	•		•		identified items that are preventing certification of ddress the concerns, and re-inspect.					
		• An Annual Inspection Certification Report was submitted to Stormwater Staff and denied. The site needs dditional time to address the issues identified by staff, and then have a qualified professional re-inspect.										
(Part 2)	- Pl	ease initi	ial to confirm	the foll	owing:							
	Α.	conditio	n of the site/SC	CM(s), a	nd the items prev	enting certi	from a qualified professional, documenting the ification as "in-compliance." The qualified fyou selected "B" in Part 1).					
	В.	I have confirmed with all hired professionals that all maintenance/repair work and re-inspections needed for certification can be completed before the extension date being requested.										
	C.				that the necessar, scope of work, i		maintenance have been contracted/scheduled .)					
Site Re	cord	Keeping	:									
[] YES	[] NO Does this site maintain records of routine inspection, maintenance and/or repair performed on the SCM(s)?										
[] YES	[] NO Does this site maintain copies of their Annual Inspection Reports previously accepted by the City?										
[] YES	[] NO	NO Does the site maintain documentation on their SCM(s)? (such as as-built plans, as-built certification, device detail plans, O&M Manuals, etc)									
Extensi	on F	Request D	Date:									
All	iten	ns preven	ting certificatio	n will b	e addressed, and	a certified a	annual inspection report submitted to staff by;					
		(month))			(day)	(year)					
							(year) ction report by the date requested may					
		result in	-	-	-		d that using an extension request may nsion in the future.					
			ρισι	ייטונ נוופ	. Site 3 ubility tO t	ASC UII EXLEI	nsion in the juture.					
Site Re	pres	entative	Signature:				Date:					

EXTENSION REQUEST FORM

Qualified Professional Page

This page (2) should be completed by the qualified professional. Note that all Annual Inspection reports must be completed and certified by a North Carolina Professional engineer, surveyor, or landscape architect. To request an extension the Qualified Professional completing the annual inspection needs to provide a NON-CERTIFIED/Failed Inspection Report detailing the items preventing certification, unless otherwise instructed by staff.

Sele	ect One:		[]	Surveyor	[] Engineer		[] Landscape Architect					
Name:					License Number:							
Title: _	e: Company Name:											
Addres	s:											
					State:							
Email:				Direct Phone:								
Inform	ation to	Incl	ude in I	Failed Inspection F	Report							
	Statem Photos ere are m	ents dep ultip	about licting sole device	the items preventi ite conditions, and es in a report, the in	and level of maintenance/cong certification of the device items preventing certification formation and photos for each acced by identifiers on stormwaters.	es/site, and recor on. device should be	mmended action. clearly separated					
Please	Check al	l th	at Appl	у								
	(includi	ng o e ap	pen spa plicable	ce areas) are perfo	n of the site, I found that not a rming properly and/or in com ual required by Unified Develo rcourse Buffer Manual.	pliance with the a	approved stormwater control					
	_				nd/or repairs that need to be	completed to ce	ertify the devices.					
	I have d	etai	led the	items that are preve	enting certification of the site	in a report forma	it on the attached pages.					
	I have s	pok	en with	the site and/or th	eir hired professionals about	t having these ite	ems addressed.					
	I intend to perform the re-inspection of this site, and certification of the annual inspection report once the items detailed below are addressed.											
					e(s):							
(Wetland,	Wet Pond,	Dry F	Pond, Biore	etention, UG Detention, L	JG Sand Filter, Grassed Swale, Level Spr	eader w/ VFS, PPUOS,	Permeable Pavement, Infiltration)					
Answe	r the foll	owi	ing, and	provide any addi	tional details in the attached	d report (NR = No	o Representation)					
[] YES	[] NC	[] NR	the year?	ne SCM(s)/site is receiving ad	·	maintenance throughout					
[] YES	[] NC	[] NR	Are there any o	ongoing maintenance concer	ns at this site?						
[] YES	[] NC	[] NR	Do you think a	ny SCM(s) is nearing its life e	xpectancy?						
[] YES	[] NC	[] NR	Are there any I for?	arge maintenance or repair i	tems you recom	mend the site prepare					
[] YES	[] NC	[] NR	Any recommer	ndations to improve the mair	ntenance or func	tion of the device(s)?					

Date: _____

Qualified Professional Signature: