

MAINTENANCE ACTIVITY REPORT

(Response requested within 45 days of receipt)



According to County records you are the current owner of a privately maintained stormwater management facility that had deficiencies at the time of an inspection on ______. This standard Maintenance Activity Report is requested as part of the private inspection/enforcement process. Failure to complete this form in a timely manner could result in a non-compliance status which could lead to enforcement activities.

Complete this form legibly in ink and mail or email to the following address within 45 days of receipt.

Please reference your Site ID and Facility ID in all correspondence

Ownership and Contact Information

Current Owner:	Owner's Agent for Maintenance:
Name:	Name:
Company:	Company:
Address:	Address:
Phone:	Phone:
Fax:	Fax:
Email:	Email:

Description of Work Completed Attach any invoices, photos or other information relative to maintenance performed or planned	Date Completed	Cost
See other side for additional space.		

I.

_____, hereby certify that the statements above are true to the best of my knowledge.

Printed Name

	Signature (Owner or Owner's Agent)	Title	Date		
Legislat	ion/Regulations/Permitting/Guidelines:				
•	 Fairfax County Codified Ordinances – Chapters 104, 112, 118 & 124 Fairfax County Public Facilities Manual (PFM), Chapter 6: Storm Drainage Virginia Stormwater Management Program (VSMP) (§9VAC25-870) 				
•	Virginia Chesapeake Bay Preservation Act (§9VAC25-8) Federal Clean Water Act/Section 402-(P) enabling the Na	30)	rstam under which Fairfax County is		
•	required to meet Federal mandates as required by the Mu	ζ.	-		

Description of Work Completed Attach any invoices, photos or other information relative to maintenance performed or planned		Cost
	Completed	
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