

## Green Roof Inspection and Maintenance Checklist

<b>Facility:</b>			
<b>Location/Address:</b>			
<b>Date:</b>	<b>Time:</b>	<b>Weather Conditions:</b>	<b>Date of Last Inspection:</b>
<b>Inspector:</b>		<b>Title:</b>	
<b>Rain in Last 48 Hours:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, list amount and timing:</b>			
<b>Type of Irrigation System:</b> <input type="checkbox"/> overhead <input type="checkbox"/> drip <input type="checkbox"/> other, specify:			
<b>Results from Most Recent Soil Test Available:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Site Plan or As-Built Plan Available:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No			

Inspection Item	Comment	Action Needed
<b>1. VEGETATION</b>		
Plant cover is less than 90%. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Vegetation is wilting, discolored, or dying due to disease, pests, or stress. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Vegetation is stressed due to drought. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Vegetation needs to be controlled through manual removal or mowing if specified by manufacturer. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>2. GROWING MEDIUM/SOIL LAYER</b>		
Standing water is present. If yes, describe color or smell. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Sediment has accumulated at the surface or throughout the media. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Gullies or other evidence of erosion are observed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Soil depth is insufficient. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Based on most recent soil test, fertilization is needed. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>3. STRUCTURAL COMPONENTS</b>		
Waterproof membrane is cracked or leaking. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other structural components are in poor condition. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>4. INLETS/DRAINAGE LAYER</b>		
Inlets are in poor structural condition. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
Sediment, vegetation, trash or debris are blocking inlets. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>5. IRRIGATION SYSTEM</b>		
Drip lines, supply lines, or other irrigation components are not functioning or are in poor structural condition. <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Additional Notes**

**Wet weather inspection needed**  Yes  No

**Site Sketch:**