

STORMWATER MANAGEMENT

201 Attachment 1

Town of Windham

Appendix 1

**Annual Stormwater Management Facilities Certification
(to be sent to Municipal Enforcement Authority)**

I, _____ (print or type name), certify the following:

1. I am making this annual stormwater management facilities certification for the following property: _____ (print or type name of subdivision, condominium or other development) located at _____ (print or type address), (the "property");
2. The owner, operator, tenant, lessee or homeowners' association of the property is: _____ [name(s) of owner, operator, tenant, lessee, homeowners' association or other party having control over the property];
3. I am the owner, operator, tenant, lessee or president of the homeowners' association, or am a qualified third-party inspector hired by the same (circle one);
4. I have knowledge of erosion and stormwater control and have reviewed the approved post-construction stormwater management plan for the property;
5. On _____, 20____, I inspected or had inspected by _____, a qualified third-party inspector, the stormwater management facilities, including but not limited to parking areas, catch basins, drainage swales, detention basins and ponds, pipes and related structures required by the approved post-construction stormwater management plan for the property;
6. At the time of my inspection of the stormwater management facilities on the property, I or the qualified third-party inspector identified the following need(s) for routine maintenance or deficiencies in the stormwater management facilities:

7. On _____, 20____, I took or had taken the following routine maintenance or the following corrective action(s) to address the deficiencies in the stormwater management facilities stated in 6 above:

WINDHAM CODE

8. As of the date of this certification, the stormwater management facilities are functioning as intended by the approved post-construction stormwater management plan for the property.

I, as the Qualified Post-Construction Stormwater Inspector, understand that I am to furnish a copy of all of my inspection report(s) to the Municipal Enforcement Authority.

Date: _____, 20_____

By: _____
Signature

Print Name

STATE OF MAINE _____, 20_____
_____, ss

~~Personally appeared the above named _____, the _____ of _____, and acknowledged the foregoing annual certification to be said person's free act and deed in said capacity.~~

~~Before me,~~

~~Notary Public/Attorney at Law~~

~~Print Name: _____~~

Commented [MW1]: Remove requirement for notarization of form.

Mail this certification to the Town of Windham at the following address:

**Office of Code Enforcement
Town of Windham
8 School Road
Windham, ME 04062**