

DOT SITE INSPECTION REPORT

MITIGATION SITE NAME	TIP #	WBS #	INSPECTION DATE
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COUNTY	# ACRES
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MONITORING ORGANIZATION NCDOT	INSPECTOR	PHONE	EMAIL ADDRESS
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INSPECTION ACTIVITIES: <i>Complete all that apply. Describe location of visited areas if <100%.</i>			
Walked boundaries <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Walked trails / roads <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Walked road frontage <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Walked interior <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		
Monitored from air <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A			
Condition of boundaries <div style="display: inline-block; margin-left: 100px;"> <input type="checkbox"/> GOOD </div> <div style="display: inline-block; margin-left: 50px;"> <input type="checkbox"/> FAIR </div> <div style="display: inline-block; margin-left: 50px;"> <input type="checkbox"/> POOR </div>			
COMMENTS:			

WHICH NATURAL ACTIVITIES / CHANGES HAVE TAKEN PLACE SINCE LAST MONITORING INSPECTION?
Check all that apply. Note location and extent. Wherever possible, note species of concern. Document with photos.

<input type="checkbox"/> FLOODING	<input type="checkbox"/> FIRE	<input type="checkbox"/> STORM	<input type="checkbox"/> EARTH MOVEMENT
<input type="checkbox"/> INVASIVE EXOTIC VEGETATION	<input type="checkbox"/> INSECT INFESTATION	<input type="checkbox"/> ANIMAL ACTIVITY	<input type="checkbox"/> OTHER ACTIVITIES/ CHANGES? <i>(Please Explain)</i> <input type="checkbox"/> NO CHANGE
EXPLAIN:			

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WHICH MANMADE ACTIVITIES / CHANGES HAVE TAKEN PLACE SINCE LAST MONITORING?

Check all that apply. Note location and extent. Document with photos.

<input type="checkbox"/> NEW STRUCTURE / CONSTRUCTION	<input type="checkbox"/> DUMPING OR STORING	<input type="checkbox"/> NEW TRAILS OR ROADS
<input type="checkbox"/> TIMBER HARVEST/ VEGETATIVE CUTTING	<input type="checkbox"/> EXCAVATION (DREDGING, FILLING, GRADING, MINING)	<input type="checkbox"/> ALTERATION TO DRAINAGE PATTERNS/WATER QUALITY
<input type="checkbox"/> SUBDIVISION	<input type="checkbox"/> INDUSTRIAL, RESIDENTIAL, OR COMMERCIAL USE	<input type="checkbox"/> LAND CLEARING
<input type="checkbox"/> MOTORIZED VEHICLE DAMAGE	<input type="checkbox"/> TRESPASS/VANDALISM	<input type="checkbox"/> AGRICULTURAL USE
<input type="checkbox"/> ENCROACHMENT FROM ADJACENT PROPERTY	<input type="checkbox"/> ACTIVITY ON ABUTTING LAND	<input type="checkbox"/> OTHER ACTIVITIES / CHANGES? <i>(Please Explain)</i>
<input type="checkbox"/> NO CHANGE		

EXPLAIN:

REQUEST FOLLOW-UP BY PROGRAM MANAGER FOR POSSIBLE VIOLATIONS.

☐ YES

☐ NO

Were corrective actions
completed for previous
inspection(s)? ☐ YES ☐ NO
☐ N/A

EXPLAIN:

Are you aware of any plans
that may affect property? ☐ YES ☐ NO

EXPLAIN:

Are there concerns about
boundaries by adjacent
property owners? ☐ YES ☐ NO

EXPLAIN:

Are there changes in land use
on adjacent property? ☐ YES ☐ NO

EXPLAIN:

Are deed restrictions being
adhered to? ☐ YES ☐ NO

EXPLAIN:

If new property owner, do
they have a written copy of
the restrictions? ☐ YES ☐ NO
☐ N/A

ATTACHMENTS:

- 1) MAP OF PERMANENT PHOTO PLOTS
- 2) PHOTOGRAPHS WITH CAPTIONS
- 3) MAP AND PHOTOGRAPHS WITH CAPTIONS OF RELEVANT NATURAL AND MANMADE ACTIVITIES
- 4) OTHER (SPECIFY)



NCDOT
Stewardship Program Mitigation
Site Reviews

Project Name: Plemmons-Kirkpatrick Creek Site

TIP No. A-0010WM
 Division No. 13
 County: Madison

September 2017

 