

GREENE STREET INSPECTION REPORT

MITIGATION SITE NAME Greene Street	TIP # B-2225WM	WBS #	INSPECTION DATE 1-16-2013
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COUNTY Pitt	# ACRES
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MONITORING ORGANIZATION NCDOT	INSPECTOR RWG/BGM	PHONE (919)707-6121	EMAIL ADDRESS rgriffin@ncdot.gov
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INSPECTION ACTIVITIES: <i>Complete all that apply.</i>			
Walked boundaries	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A
Walked trails / roads	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A
Walked road frontage	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A
Walked interior	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	<input type="checkbox"/> N/A
Monitored from air	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A
Condition of boundaries	<input checked="" type="checkbox"/> GOOD	<input type="checkbox"/> FAIR	<input type="checkbox"/> POOR
COMMENTS: Site remains in excellent condition at this time. No trespass issues noted and no further mowing or cutting observed at time of review.			

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 checked="" 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 checked="" type="checkbox"/> NO CHANGE		

EXPLAIN:

REQUEST FOLLOW-UP BY PROGRAM MANAGER FOR POSSIBLE VIOLATIONS.

☐ YES

☒ NO

Were corrective actions completed for previous inspection(s)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
		<input checked="" type="checkbox"/> N/A	EXPLAIN:
Are you aware of any plans that may affect property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	EXPLAIN:
Are there concerns about boundaries by adjacent property owners?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	EXPLAIN:
Are there changes in land use on adjacent property?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	EXPLAIN:
Are deed restrictions being adhered to?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	EXPLAIN: Mowing within site. Need to install signs and contact Division
If new property owner, do they have a written copy of the restrictions?	<input type="checkbox"/> YES	<input type="checkbox"/> NO <input checked="" type="checkbox"/> 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)

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Greene St. Mitigation Site

Pitt Street

Greene Street

Tar River

1st Street