ADDENDUM ____ STORMWATER WETLAND STORMWATER CONTROL MEASURES MINIMUM MAINTENANCE AGREEMENT

| Project Name: | | | |
|-----------------------|------|------|--|
| - 10jeet 1 (m. 110) . | | | |
| | | | |

I will keep a maintenance record on this SCM. After the stormwater wetland is established, I will inspect it monthly and within 24 hours after every storm event greater than 1.0 inches.

Records of operation and maintenance will be kept in a known set location and will be available upon request by the Town of Spring Lake Stormwater Administrator. Any deficient SCM elements noted in the inspection will be corrected, repaired or replaced immediately. These deficiencies can affect the integrity of structures, safety of the public, and the removal efficiency of the SCM.

Important operation and maintenance procedures:

- Immediately following construction of the stormwater wetland, bi-weekly inspections will be conducted and wetland plants will be watered bi-weekly until vegetation becomes established (commonly six weeks).
- No portion of the stormwater wetland will be fertilized after the first initial fertilization that is required to establish the wetland plants.
- Stable groundcover will be maintained in the drainage area to reduce the sediment load to the wetland.
- Once a year, a dam safety expert should inspect the embankment.

Inspection activities shall be performed as follows. Any problems that are found shall be repaired immediately.

| SCM element: | Potential problem: | How I will remediate the problem: |
|-----------------------------|---|---|
| Entire SCM | Trash/debris is present. | Remove the trash/debris. |
| Perimeter of wetland | Areas of bare soil and/or erosive gullies have formed. | Regrade the soil if necessary to remove the gully, and then plant a ground cover and water until it is established. Provide lime and a one-time fertilizer application. |
| | Vegetation is too short or too long. | Maintain vegetation at an appropriate height. |
| Inlet device: pipe or swale | The pipe is clogged (If applicable). | Unclog the pipe. Dispose of the sediment where it will not impact streams or the SCM |
| | The pipe is cracked or otherwise damaged (if applicable). | Repair or replace the pipe. |

| SCM element: | Potential problem: | How I will remediate the problem: |
|--|---|---|
| Inlet device: pipe or swale (continued) | Erosion is occurring in the swale (if applicable). | Regrade the swale if necessary to smooth it over and provide erosion control devices such as reinforced turf matting or riprap to avoid future problems with erosion. |
| Forebay | Sediment has accumulated in the forebay to a depth that inhibits the forebay from functioning well. | Search for the source of the sediment and remedy the problem if possible. Remove the sediment and dispose of it in a location where it will not cause impacts to streams or the SCM. |
| | Erosion has occurred. | Provide additional erosion protection such as reinforced turf matting or riprap if needed to prevent future erosion problems. |
| | Weeds are present. | Remove the weeds, preferably by hand. If a herbicide is used, wipe it on the plants rather than spraying. |
| Deep pool, shallow water and shallow land areas | Algal growth covers over 50% of the deep pool and shallow water areas. | Consult a professional to remove and control the algal growth. |
| | Cattails, phragmites or other invasive plants cover 30% of the deep pool and shallow water areas. | Remove invasives by physical removal or by wiping them with herbicide (do not spray) – consult a professional. |
| | Temporary inudation zone remains flooded more than 5 days after a storm event. | Unclog the outlet device immediately. |
| | Plants are dead, diseased or dying. | Determine the source of the problem: soils, hydrology, disease, etc. Remedy the problem and replace plants. Provide a one-time fertilizer application to establish the ground cover if necessary. |
| | Best professional practices show that pruning is needed to maintain optimal plant health. | Prune according to best professional practices. |
| | Sediment has accumulated and reduced the depth to 75% of the original design depth of the deep pools. | Search for the source of the sediment and remedy the problem if possible. Remove the sediment and dispose of it in a location where it will not cause impacts to streams or the SCM. |
| Embankment | A tree has started to grow on the embankment. | Remove trees <6". Consult a dam safety specialist to remove trees >6" |

| SCM element: | Potential problem: | How I will remediate the problem: |
|---------------------------|--|--|
| Embankment (continued) | An annual inspection by appropriate professional shows that the embankment needs repair. | Make all needed repairs. |
| | Evidence of muskrat or beaver activity is present. | Consult a professional to remove muskrats or beavers. |
| Micropool | Sediment has accumulated and reduced the depth to 75% of the original design depth. | Search for the source of the sediment and remedy the problem if possible. Remove the sediment and dispose of it in a location where it will not cause impacts to streams or the SCM. |
| Outlet device | Clogging has occurred. | Clean out the outlet device. Dispose of the sediment off-site. |
| | The outlet device is damaged | Repair or replace the outlet device. |
| Receiving water | Erosion or other signs of damage have occurred at the outlet. | Contact the NC DEQ Regional Office |

| I, | , hereby acknowledge that I am |
|--|---------------------------------|
| the financially responsible party for maintenance of this SCM. I w | vill perform the maintenance as |
| outlined above, in compliance with the requirements of the Town | of Spring Lake's Phase II MS4 |
| Stormwater Ordinance and the latest version of the NC DEQ Stor | mwater Design Manual. |
| | |
| Signature: | Date: |

| STATE OF NORTH CAROLINA COUNTY OF | | | | |
|---|---------------------------------|---------------------|-----|--|
| I, | , a Notary Public of _ | County, | in | |
| the State of North Carolina, do hereby certify that | | | | |
| appeared before me this day and acknow | ledged the execution of the for | regoing instrument. | | |
| Witness my hand and seal, this da | y of, 20 | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| (SEAL) | | Notary Pub | lic | |
| My Commission Expires: | | | | |