

**STORMWATER BMP OPERATION & MAINTENANCE
FORM MINNEAPOLIS DEPARTMENT OF PUBLIC
WORKS WATER RESOURCES**

City of Minneapolis ID#:

To be completed by city

To be Completed by Developer/Property Owner:

Name of Site/Description			
Location of BMP (Include Address and Reference major streets/highways; attach site map including BMP locations and access points):			
Owner Information		Property ID Number- PID	
Name of Owner		Telephone:	
Address:			
City, State, Zip Code:			
Owner's Contact Person (if different than owner)			
Name:		Telephone:	
BMP Proposed (Attach BMP/System Diagram):			
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Bioretention/Rain Garden <input type="checkbox"/> Wet Pond <input type="checkbox"/> Other: </div> <div style="width: 45%;"> <input type="checkbox"/> Proprietary Device <input type="checkbox"/> Underground Storage <input type="checkbox"/> Underground Infiltration </div> </div>			
Installation Date:		Installation Contractor:	
Inspection Responsibility Information			
Name:		Title:	
Company:		Telephone:	
Address:			
City, State, Zip Code			
Maintenance Responsibility Information			
Name:		Title:	
Company:		Telephone:	
Address:			
City, State, Zip			
Signature of Responsible Person:		Date:	

Please return this page along with record drawings for the referenced property detailing the as-constructed location, detailed cross-sections, access points, elevations and profiles of each BMP to:

**Paul Chellsen, Water Resources Technician
City of Minneapolis, Department of Public Works
309 2nd Avenue South, Room 300
Minneapolis, MN 55401-2268**