

**INSPECTION REPORT - CHANNELS**

Date: \_\_\_\_\_

Location \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

Watershed (If applicable) \_\_\_\_\_

Inspection Team

	1 _____	2 _____
	3 _____	4 _____
	5 _____	6 _____

Project Channels - Review Subparts D & F of National O&M Manual before inspection.  
 Non-project Channels - Review Subparts C & F of National O&M Manual before inspection.

ITEM	CHANNEL NAME OR NUMBER							
Sedimentation								
Degradation								
Channel Bank Stability								
Riprap								
Vegetation								
Concrete Structures								
Joints								
Cracks								
C.M. Pipe Structures								
Corrosion								
Rilling								
Cathodic Protection								
Dikes								
Obstructions								
Trees								
Brush								
Debris								
Field Dikes								
Farming Operation								
Bike Trails								
Other (List)								
1.								
2.								

**NA - Not Applicable      NP - No Problem      (1) - See Remarks, refer to remark by appropriate number**

**REMARKS**