



TOWNSHIP OF MAPLE SHADE

200 Stiles Avenue
Maple Shade, NJ 08052
(856) 779-9610



PERVIOUS PAVERS / PAVEMENT REPORT FORM

(Complete One Form Per Individual Paver / Pavement System)

Property owners, homeowners associations, business owners, and residents responsible for maintenance of a detention basin must submit the following form annually by December 31st to the Department of Public Works.

Questions? Contact Patrick Lyons at 856-779-9610 ext. 221

Please carefully complete the form, attach any necessary photos/files, and submit it to:
Patrick Lyons, Director of Public Works, 200 Stiles Avenue, Maple Shade, NJ 08052
or via email to plyons@mapleshade.com

PAVERS / PAVEMENT LOCATION

Pavers / Pavement Block: _____ Pavers / Pavement Lot: _____

Pavers / Pavement Address: _____

OWNER INFORMATION

Owner's Name: _____

Owner's Address: _____

Owner's Block: _____ Owner's Lot: _____

Owner's Phone #: _____

Owner's Email Address: _____

Check this box if Responsible Party Information is the SAME as Owner Information Above

RESPONSIBLE MAINTENANCE PARTY INFORMATION:

Responsible Entity's Name: _____

**Name of Developer, HOA, Property Management Company, or Property Owner responsible to maintain this stormwater facility.*

Contact Person's Name: _____

Contact Person's Address: _____

Contact Person's Phone #: _____

Contact Person's Email Address: _____



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STORMWATER MANAGEMENT MEASURE INSPECTION CHECKLIST

Inspection Checklist Instructions: Check off any conditions for the stormwater measure(s) you have. Any checkmarks require preventative and/or corrective maintenance. See forms on [NJDEP website](#) for suggested actions. This list represents general requirements.

BOTTOM OF SYSTEM

Drain time in approx. hours _____
More than 72 hours may need corrective action.

OUTLET

- Trash or debris accumulation more than 20%
- Discharge pipe apron is eroded or scoured

PERVIOUS PAVERS OR PERVIOUS PAVEMENT

- Cracking, subsidence, spalling, or other pavement damage
- Weeds or other vegetation on the pavement
- Loss of stone between paver joints (if applicable)

Form Prepared By: _____ Date: _____