

SEWER INSPECTION AND MAINTENANCE REPORT

Date of Inspection: _____ Time of Inspection: _____ AM/PM

Name of employee completing report: _____

Location *Address*: _____ Line: _____ Manhole #: _____

Reason for inspection or maintenance (Please select one):

Routine / Scheduled / Preventative / Overflow / Recurring Issue

Conditions found (both usual and unusual; unusual conditions to be reported immediately to a supervisor): _____

Notified supervisor(s): _____

Personnel who performed inspection/maintenance: _____

List inspection or maintenance work performed: _____

List equipment used: _____

Based on conditions found during this visit, it is recommended that this location be inspected/provided maintenance again within:

| | | | |
|-------------|-------|-----------|-------|
| Immediately | _____ | 9 months | _____ |
| 1 month | _____ | 12 months | _____ |
| 3 months | _____ | 18 months | _____ |
| 6 months | _____ | 24 months | _____ |

Follow up action needed at this location:

Other information:

TO BE COMPLETED BY HOME/BUSINESS OWNER

NON-WAIVER OF DEFENSES AGREEMENT

NAME OF PERSON REQUESTING ENTITY SERVICES:

PROPERTY LOCATION: _____

NATURE OF PROBLEM: _____

REQUESTING PARTY'S INTEREST IN PROPERTY:

Owner _____ Tenant _____ Other _____

1. I have requested the assistance of the local government of _____ in correcting a problem with _____ at the address listed above.
2. Any assistance provided by the local government is voluntary and shall not constitute an admission of responsibility for the problem or waiver of any defenses by the local government to any claim whatsoever.
3. Any assistance by the local government shall not obligate the local government to continue any assistance.
4. The local government expressly reserves any and all defenses to any and all claims of whatsoever nature.
5. I have read this agreement and understand its terms fully and understand that it is binding on me.
6. I have received a copy of this agreement.

READ CAREFULLY BEFORE SIGNING!

Sign: _____

Date: _____