

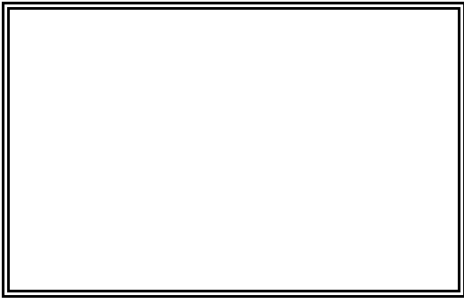
CLARK REGIONAL WASTEWATER DISTRICT

DISTRICT TELEVISION

INSPECTION REQUEST

Phone: (360) 750-5876

Fax: (360) 750-7570



(Date Received Stamp)

First TV Request _____ **Re-TV Request** _____

TV Inspection Fees Amount \$ _____ Date Paid _____ Fees Received By: _____

The Clark Regional Wastewater District requires a 5 working day notice to allow time to schedule the District Maintenance Inspector. This five (5) day process begins when notice is received by the District, **provided that the project is ready (including all inspection, channeling, etc.).**

PROCEDURE:

- 1) The contractor will determine that all work is done including:
 - Mandrel & air testing Line flushing & cleaning All manhole channeling
 - Passing compaction testing Rock placed on subgrade/site is accessible
- 2) The contractor shall submit this request form to the Inspector.
- 3) The request form will go back to the contractor (if work is incomplete/not ready) or will be forwarded to the Maintenance Supervisor for scheduling.
- 4) Following scheduling, the District's Maintenance Department will contact the contractor as to the anticipated time of the TV inspection.

Date of Request: _____ Date of Requested Inspection: _____

Sanitary Sewer Contractor's Representative: _____

Sanitary Sewer Contractor: _____ Phone No. _____

Project Name: _____ District Job No. _____

Inspector Approval: _____ Date: _____
(Ready for TV Inspection) (Signature)

Received by Maintenance Supervisor: _____ Date: _____
(Signature)

TV scheduled (by Contractor): _____ Date & Time: _____
(Signature)

Maintenance Inspector: _____ Date: _____
(Lines meet District Requirements) Yes No (Signature)