

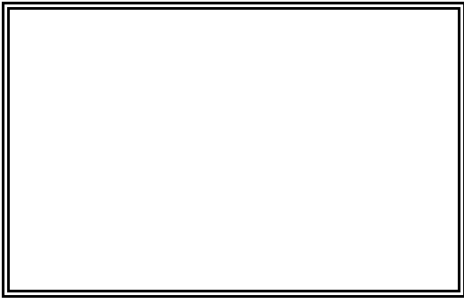
# CLARK REGIONAL WASTEWATER DISTRICT

## ***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)