

Sale # \_\_\_\_\_

**Forward Township Sewer Lateral Inspection**

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

Crew: \_\_\_\_\_

Location/Address: \_\_\_\_\_ Lot #: \_\_\_\_\_

Contractor / Builder: \_\_\_\_\_

**PASS / FAIL**

	<b><u>YES</u></b>	<b><u>NO</u></b>	<b><u>COMMENTS</u></b>
Pipe SCH 40 - 4" PVC	_____	_____	Length: _____ Depth: _____
Bedding Stone 1B or 2B (4" min thickness)	_____	_____	_____
Proper Vent Installation	_____	_____	_____
Proper Trap Installation	_____	_____	_____
Proper Clean Out Installation	_____	_____	_____
Minimum Slope of 1/8" / Ft.	_____	_____	_____
Proper 4" Inspection Stack	_____	_____	_____
Proper Connection to 6" WYE	_____	_____	_____
Any Additional Cleanouts	_____	_____	_____

Number: \_\_\_\_\_

**SKETCH:**

Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_