

FINAL LIFT or BOOSTER PUMP STATION / GENERATOR INSPECTION REPORT

Development Name: _____

Development Location: _____

Contractor Name: _____

1. Are grout joints in the wet well and effluent piping penetration proper?
Yes ____ No ____
If No, specify areas _____

2. Are suction lines and appropriate elbows properly installed and grouted to the wet well floor?
Yes ____ No ____
If No, specify areas _____

3. Is the air bell installed properly in the wet well?
Yes ____ No ____

4. Is the lift or booster pump station and generator properly squared and securely anchored to the slab?
Yes ____ No ____
If No, specify areas _____

5. Is the electrical service properly sized?
Yes ____ No ____
If No, specify size _____

6. Are proper conductors used?
Yes ____ No ____
If No, specify _____

7. Have the proper telemetry components been installed and tested?
Yes ____ No ____
If No, specify _____

8. Has the proper security lighting been installed and tested?
Yes ____ No ____
If No, specify _____

9. Is the generator Kw loading properly sized, has the generator and its components been properly installed and tested?

Yes ____ No ____

If No, specify _____

10. Has the fence, gate and site area gravel been installed per specifications?

Yes ____ No ____

If No, specify _____

11. Does the approved access road comply with specifications?

Yes ____ No ____

If No, specify _____

12. Has a manufacturer's representative inspected and tested the lift station and generator?

Yes ____ No ____

If yes, attach the manufacturer's approval inspection and testing report.

WCW&SA Inspector:

Signature: _____ **Date:** _____