

Sewer Lateral Inflow & Infiltration Inspection Report

Private Side, From Utility Easement Up To

And Including Structure Plumbing

To be completed by a Licensed Plumber, and submitted to Clear Creek Conservancy District via USPS or email.

Clear Creek Conservancy District

P.O. Box 286 billing.clearcreek@tds.net

 Greencastle, IN 46135

**Property Information**

Property Owner’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Site Address (Neighborhood & Lot # Only): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner’s Mailing Address: Same as Site Address

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Inspector’s Information**

Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Inspector’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Inspector’s Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**General Observations**

Home Foundation: Slab Crawl Space Basement

Number of outside sewer lateral cleanouts: \_\_\_\_\_\_ Properly capped? Yes No

Basement/crawlspace sump pump(s) properly discharge outside? Yes No No Sump

Sewer ejector pump in use? Yes No

Number of structures at address served by the private sewer lateral (Including Home): \_\_\_\_\_\_

**CCTV Sewer Inspection (Optional)**

Completed camera inspection full distance (from home to main sewer connection)? Yes No

Total linear feet inspected: \_\_\_\_\_\_

Sewer Video Discovery Notes (e.g. cracked pipe, open joints, root or cable breach, unknown Wye/Tee entry) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Additional Inspection Notes (Optional)** If applicable, please list all non-compliances. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Drawing/Sketches (Optional)**

**Inspection Results**

Property has been verified as having no illegal connections, including sump pumps, roof gutters, foundation/perimeter drains, open loop heat pumps, etc.; entering the sanitary sewer system. Yes, passes inspection No, fails inspection

Note: If initial inspection did not pass, please submit BOTH this failed inspection AND a new passing inspection to Clear Creek Conservancy District once corrections have been made. This allows us to document I/I improvements to the collection system.

The information submitted herewith complies with all requirements set forth by the Clear Creek Conservancy District. I declare under penalty of perjury that all information submitted here is true and correct to the best of my knowledge, and applies to the listed address only.

Inspector’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_