PROJECT ACCEPTANCE CHECKLIST

Section _____ Township_____ Range____

Project Name _____ # of Lots _____

Location _____

Developer _____ Engineer _____

Serving Water Plant _____ Serving Sewer Plant _____

Commercial _____ Residential _____

I Plans

A. As-builts Date_____

II Inspections and Tests

A. Preconstruction Conference Date_____
B. Reclaim Pressure Test Date_____
C. Water Pressure Test Date_____
D. Sewer Line Lamping Date_____
E. Force Main Pressure Test Date_____
F. Infiltration/Exfiltration Test Date_____
G. Lift Station Start-up Date_____
H. Fire Hydrant Flow Test Date_____
I. As-built Plan/Locator Ball Inspect. Date_____
J. Grooming Inspection Date_____
K. Final Acceptance Inspection Date_____

III Florida Dept. Of Environmental Protection

A. Bacteriological Test Passed Date_____
B. Certificate of Completion Water Date_____
Sewer Date_____

IV Construction Cost (for acceptance by County)

A. Water_____ Sewer_____ Total_____
B. Lift Station_____
C. Water main footage _____ # of Hydrants_____
Gravity main footage _____ # of Manholes_____
Force main footage_____
Reclaim footage _____

Date_____ Inspector_____