## Ashley Valley Water and Sewer Improvement District

609 W. Main, P.O. Box 967 Vernal Utah 84078 435-789-9400~Fax 435-789-5754

## **NEW WATER SERVICE LINE INSTALLATION AND INSPECTION FORM**

The undersigned hereby requests an inspection of the installation of the water service line listed below and agrees to release Ashley Valley Water and Sewer Improvement District of any and all claims relating to the installation of the water service line. Customer is responsible for water service line from the home to the point of connection to water meter. Inspection services are strictly for ensuring that District installation standards are met and is not intended to provide any kind of warranty or guarantee against future use.

CHECK WHICH APPLIES TO YOU: Homeowner  Contractor  Service Address:									
					Homeowner Name:Phone Number:  Contractor Name:Phone Number:  Subdivision:Lot Number:  Contractor Signature:Date:				
INSTALLATION AND INSPECTION (for inspector of	use only)								
Name of Inspector: <u>ALLEN HACKING</u>									
<ul> <li>Is the Contractor Licensed and Bonded?</li> </ul>	Yes		No						
<ul> <li>Does the service line meet installation specifications?</li> </ul>	Yes		No						
<ul> <li>Are all underground fittings made of brass?</li> </ul>	Yes		No						
<ul> <li>Does the pipe zone have select bedding compacted under pipe?</li> </ul>	Yes		No						
• Is there a minimum of 10' separation from the sewer lateral?	Yes		No						
<ul> <li>Is the service line high pressure polyethylene?</li> </ul>	Yes		No						
<ul> <li>Will the service line have a minimum of 5' bury?</li> </ul>	Yes		No						
<ul> <li>Is the meter located outside of the driveway, sidewalk, or anywhere snow removal may expose meter to freezing.</li> </ul>	Yes		No						
<ul> <li>If needed, is there an approved backflow assembly, with appropriate shut-off valve? The only approved devices are Reduced Pressure Principle (RP), or a Pressure Atmosphere Vacuum Breaker (PVB).</li> </ul>	Yes		No						
Have photographs been taken?	Yes		No						
Comments:									
INSPECTORS SIGNATURE:	DATE:								
DATE OF CONNECTION: IMPACT FEE'S PAID: (Check with office)									