



Town of Davie

Site Visit Inspection Form

Permit #: _____

PLS #: _____

General Applicant Information

Applicant:			
Street Address:			
Description:			
Owner Contact Information:			

Date:		Time in:		Weather:
		Time out:		

Town of Davie Inspector	
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1. Lift Station User **Identify types/number of services connected to the lift station**

Single Family Homes (HOA Name/# units):

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Multi-family Homes (Condo/Apt Name #units):

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Commercial Businesses (names/#/type):

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Preventative Maintenance & O&M

2. Maintenance Company

Contact Name:

Cell Phone:

Are records maintained onsite?

If "No"; Explain:

Is the lift station maintained monthly?

If "No"; Explain:

PLS Permit Posted

If "No"; Explain:

Emergency Contact info Posted/correct?

If "No"; Explain:

3. Were there any incidents in the last year which required emergency services from maintenance company?

If Yes; Explain:

Spill Control Plan/SORP

	Yes
	No

Notifications:

O&M Manual Requirements:

The Operations and Maintenance Manual shall be located at the pump station control panel protected from the weather or readably available at the facility office.

Logbook Requirements:

A logbook recording all services/maintenance/repairs of the wastewater collection/transmission system shall be provided and located in a place protected from weather. In the pump station control panel or the property management office.

4. PLS Inspection

	Pass
	Fail

5. Housekeeping

HouseKeeping	N/A	Good	Poor	Comments
Odor				
Fence				
Building or Wet well (Cover)				
Landscaping maintenance				
Lift station interior walls, secure rails				
Wet well debris (i.e. grease)				
Other (identify)				

6. Alternative route for temporary piping (bypass)

Does an alternative route exist? Yes No

Identify alternative route with sketch:

Bypass valve size:

Bypass fitting size:

7. Backflow prevention

Backflow Device Present Yes No

Device Type(s):			
Date Last Certified:		Due Date:	

Comments/Recommendations:

Mechanical & Electrical Site Form

Permit #: _____

PLS #: _____

1. Electrical

Float	
Bubble	
Pressure sensitive	
Other	

Condition of Control Panel:		Satisfactory		Unsatisfactory
Do all light panels work?		Yes		No

If No; Explain:

2. Pump & Motor

Layout		Submerged
		Not Submerged -Vertical
		Not Submerged-Horizontal

Nameplate & Inspection Data (Note: if more than 2 pumps, continue on attached sheet.)

Factors	Pump 1	Pump 2
Pump Type:		
Pump Capacity (GPM):		
Can pumps alternate?		
Motor Type (NEMA, A, B, C, D):		
Motor Horsepower:		
Motor Synchronous Speed (RPM):		
Frequency (Hz):		

Condition of Pumps and Motor

Satisfactory	
Unsatisfactory	

If Unsatisfactory; Explain:

Overload heaters present and adequately sized?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	N/A
<input type="checkbox"/>	No

if No; Explain:

Where is the electrical panel for the lift station located?

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3. Alternative Power

Receptacle:

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

	Size
	Breaker

Condition of Electrical System:

Satisfactory

<input type="checkbox"/>
<input type="checkbox"/>

Unsatisfactory

If Unsatisfactory Explain:

4. Operations

a. Does all automatic equipment activate properly?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	N/A
<input type="checkbox"/>	No

If No; Explain:

b. Do floats activate pumps?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

If No; Explain:

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c. Condition of Operating System:

	Satisfactory		Unsatisfactory
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If Unsatisfactory Explain:

d. Hourly meter readings?

#1	
#2	

5. Alarm

a. Does the station have both visual and audible alarms?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

If Not; Explain:

b. Does the floats activate the alarms?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

If Not; Explain:

c. Are they in satisfactory condition?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

If Not; Explain:

6. Safety Inspection Data

Safety Factor/ condition	N/A	Good	Poor	Comments
Electrical Box				
Mounted Safety				
New electrical changes				
Other (identify)				

Provide additional comment/s if necessary:

Note: A permit is required for any electrical work to be performed as a result of this inspection.