

CROSS BORE INSPECTION REPORT

PROPERTY ADDRESS		DATE OF VISUAL INSPECTION	
MUNICIPALITY		INSPECTION COMPANY	
WORK ORDER NUMBER	CONSTRUCTION NUMBER	INSPECTOR NAME	
SEWER CAMERA RUN START MANHOLE NO. OR ADDRESS		SEWER CAMERA RUN END MANHOLE NO. OR ADDRESS	
PROPERTY DESCRIPTION <input type="checkbox"/> SINGLE-FAM <input type="checkbox"/> MULTI-FAM <input type="checkbox"/> COMM <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> SCHOOL <input type="checkbox"/> HOSPITAL <input type="checkbox"/> RELIGIOUS <input type="checkbox"/> CIVIC/GOV <input type="checkbox"/> OTHER: _____			
INSPECTION METHOD <input type="checkbox"/> PRE-CONSTRUCTION <input type="checkbox"/> POST-CONSTRUCTION <input type="checkbox"/> OTHER:		DID INSPECTION REACH BUILDING WALL <input type="checkbox"/> YES <input type="checkbox"/> NO (BLOCKAGE/UTP)	

<u>UTILITY SKETCH</u>	REFERENCE LOCATION		INDICATE <div style="text-align: center; margin-top: 10px;"> NORTH </div>		
	LOCATION OF SEWER FROM FIXED POINTS INCLUDE REFERENCE POINT TO CROSS BORE, IF PRESENT				
	POINT	FOOTAGE FROM FIXED POINT	FOOTAGE FROM FIXED POINT	*SEWER PIPE DEPTH, INCHES	*GAS LINE DEPTH, INCHES
	A				
	B				
	C				
	D				
	E				
	F				
	G				
H					
I					
J					
NOTE: SEWER TYPE, DIAMETER, AND MATERIAL IN SKETCH. MEASURE DEPTH TO TOP OF PIPE.					

CROSS BORE OBSERVED <input type="checkbox"/> YES <input type="checkbox"/> NO		CROSS BORE CAUSING SEWER BLOCKAGE <input type="checkbox"/> YES <input type="checkbox"/> NO	
CROSS BORING PIPE TYPE <input type="checkbox"/> GAS MAIN <input type="checkbox"/> GAS SERVICE <input type="checkbox"/> TELECOM <input type="checkbox"/> WATER MAIN/SERVICE <input type="checkbox"/> ELECTRIC <input type="checkbox"/> OTHER (ADD REMARKS) <input type="checkbox"/> UNKNOWN			
CROSS BORING PIPE MATERIAL <input type="checkbox"/> METALLIC <input type="checkbox"/> PLASTIC <input type="checkbox"/> OTHER (ADD REMARKS) <input type="checkbox"/> UNKNOWN			CROSS BORING PIPE DIAMETER
SEWER IMPACTED BY CROSS BORE TYPE <input type="checkbox"/> SAN MAIN <input type="checkbox"/> SAN SERV <input type="checkbox"/> STRM MAIN <input type="checkbox"/> STRM SERV <input type="checkbox"/> COMB MAIN <input type="checkbox"/> COMB SERV <input type="checkbox"/> OTHER (ADD REMARKS) <input type="checkbox"/> UNKNOWN			
SEWER IMPACTED BY CROSS BORE MATERIAL <input type="checkbox"/> CONCRETE <input type="checkbox"/> PLASTIC <input type="checkbox"/> METALLIC <input type="checkbox"/> FIBER/ORANGEBURG <input type="checkbox"/> CLAY <input type="checkbox"/> OTHER (ADD REMARKS) <input type="checkbox"/> UNKNOWN			SEWER IMPACTED BY CROSS BORE DIAMETER

FIELD REMARKS

ABBREVIATIONS: F=FRONT BK=BACK R=RIGHT L=LEFT PL=PROPERTY LINE B=BUILDING H=HOUSE SSM=SANITARY SEWER MAIN UTP=UNABLE TO PROCEED
 RLB=RIGHT OF LEFT BUILDING LRB=LEFT OF RIGHT BUILDING RRB=RIGHT OF RIGHT BUILDING LLB=LEFT OF LEFT BUILDING

6390 MAR2020 DRAFT

IF CROSS BORE FOUND, COMPLETE ELECTRONIC WORK ORDER IMMEDIATELY AND NOTIFY DTE GAS DISPATCH AT 313.235.1200.