

PIPE-INSPECTOR CHECKLIST



Inspection of Potable Water Pipelines

Project _____ Date: _____
Client _____
 Contact _____ Office Phone: _____
 E-Mail _____ Cell Phone: _____

Basic data

Pipeline type: Transmission Distribution Supply Other: _____
 Total length: _____ Year Constructed: _____ Does diameter change? _____
 Diameter max. (in.): _____ Material: _____ Pipeline length: _____
 Diameter min. (in.): _____ Material: _____ Pipeline length: _____
 Pressure min (psi): _____ Pressure max (psi): _____ Height difference: _____ m
 Bends (no. of pieces): _____ Gradient max.: _____ Culverts: _____

Fittings (no. of pieces)

T-piece: _____ Hydrants: _____ Control Valve: _____
 Tapping sleeves: _____ Valves: _____ Filters: _____
 Vents: _____ PRV: _____ Crossings: _____
 Flow velocity: _____ fps
 Sediments: Yes No Unknown Type: _____

Known obstacles: _____

Inspection purpose: Optical inspection Control of tuberculation Leak detection

Site visit before inspection requested: Yes No

Comments: _____

Place, date: _____ Stamp, signature: _____

The following data are required for the preparation of a budgetary quote:

Network plan: scale 1 : _____ (file attached)

Start point: _____
 Where can Pipe-Inspector® be launched? At a T-piece or is it necessary to cut the pipeline?

Image or scheme of start point: _____ (graphics file attached)

End point: _____
 Where can Pipe-Inspector® be launched? At a T-piece or is it necessary to cut the pipeline?

Image or scheme of end point: _____ (graphics file attached)