

Levee System RELIEF WELL INSPECTION DATA SHEET						
RELIEF WELL NO. _____		STATION_____		OFFSET_____		
If no station/offset given, provide gps lat/long reading. Photograph number: _____						
AS BUILT DEPTH_____			MEASURED DEPTH_____			
RELIEF WELL TYPE (CIRCLE ONE)		M (manhole) D (vertical discharge) T (tee discharge)				
RELIEF WELL OUTLET CONDITIONS:		(remarks)				
Missing/Damaged bolts ____ of ____						
Missing/Damaged washers ____ of ____						
GENERAL CONDITIONS:		(remarks)				
Easily accessible Y N						
Good condition Y N						
Good rust protection Y N						
Good drainage around the well Y N						
CONDITION OF VERTICAL DISCHARGE			CHECK APPLICABLE BLOCK (V)			
ITEM	N/A	Good	Fair	Poor	Missing	comment
Lid						
Screen						
Standpipe						
Checkvalve						
Checkvalve gasket						
CONDITION OF HORIZONTAL (TEE) DISCHARGE			CHECK APPLICABLE BLOCK (V)			
ITEM	N/A	Good	Fair	Poor	Missing	comment
Lid						
Flapgate						
T-stub						
REMARKS						
(DATE)		(INSPECTOR)				