

Private Property Inspection Data Collection

Inspector: _____ **Date:** _____

Tax ID	First Name	Last Name	House #	Street Name	1	2	3	4	5	6	7	8	9	10
					Entrance Allowed (Y/N)	Sanitary Sewer Connected (Y/N)	Sump Pump Connected (Y/N)	Sump Gravity Connected to San. Sewer (Y/N)	Sewer Lateral above Sump (Y/N)	Footing Drains into San. Sewer (Y/N/U)	Sump Pump Present (Y/N)	Sump Pump into San. Sewer (Y/N)	Sump Drains Laundry (Y/N)	External Drains into San. Sewer (Y/N/U)

- Key:**
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| <ul style="list-style-type: none"> 1. Did occupant of the home let you in to do the inspection? 2. Is there evidence of a sanitary sewer lateral coming into the structure? 3. Is there a sump in the cellar? 4. Does the sump gravity drain directly to the sanitary sewer lateral? 5. Is the sewer lateral higher in elevation than the top of the sump? 6. Is it evident that the footing drains are being discharged to the sanitary sewer? | <ul style="list-style-type: none"> 7. Is there a sump pump present and operational? 8. Does the sump pump discharge to the sanitary sewer lateral? 9. Does the washing machine discharge to the sump? 10. Is there evidence of roof drains or surrounding French drains discharging to the sanitary sewer lateral? |
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