

PACP® Inspection Form

Surveyors Name David Sigfrids **Certificate Number** U-605-2213 **System Owner** City of Superior **Survey Customer** City of Superior **Drainage Area** **Sheet No.** 1 of 1
P/O No. MH02437G-MH060001 **Date** 2023/09/05 **Time** 12:31 **Location (Street Name and Number)** 15th/16th&Banks/Oaks **Locality (City)** Superior
Further Location Details Upstream Manhole Number MH060001 **Rim to Invert** **Grade to Invert** **Rim to Grade** **Rim to Invert** **Grade to Invert** **Rim to Grade**
Downstream Manhole Number MH02437G **Rim to Invert** **Grade to Invert** **Rim to Grade** **Use of Sewer** Sanitary **Direction** Upstream **Flow Control** **Height** 15 in.
Width **Shape** Circular **Material** Reinforced Concrete F **Ln. Method** **Joint Length** 8.8 ft. **Total Length** 8.8 ft. **Length Surveyed** 8.8 ft. **Year Laid** **Year Rehab.** 1141
Purpose **Sewer Category** Pre-Cleaning **Cleaned** **Weather** **Location Code** **Additional Information**

Distance (Feet)	Video Ref.	Group	Description	Modifier	Cont. Defect	Inches 1st	Inches 2nd	%	Joint	At/From	To	Image Ref.	Remarks
0.00		Access Point	Manhole						<input type="checkbox"/>				MH060001
0.00		Miscellaneous	Water Level				0		<input type="checkbox"/>				
8.80		Access Point	Manhole						<input type="checkbox"/>				MH02437G