

Service Partner: \_\_\_\_\_ Dispatch Number: \_\_\_\_\_

Technician: \_\_\_\_\_ Date: \_\_\_\_\_

(A) BATHROOMS		BATH #1	BATH #2	BATH #3	(D) GARAGE / YARD		(F) KITCHEN	
	YES	NO	YES	NO	YES	NO	YES	NO
<b>WATER CLOSET</b>					<b>HOSE FAUCET #1</b>			
1. Dye test - pass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Shut-off operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Flush - pass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Vacuum breaker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Seat tight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Sealed and anchored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Bolt covers tight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Anti-siphon device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Base secure / level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Drainable shut-off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Emergency shut-off valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>HOSE FAUCET #2</b>			
7. Supply tube	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Shut-off operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Anti-siphon fill valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Vacuum breaker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>LAVATORY SINK &amp; FAUCET</b>					8. Sealed and anchored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Leaks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Anti-siphon device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Aerator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Drainable shut-off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Faucet mounted / secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>(E) GENERAL</b>			
12. Handles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>WATER SUPPLY PIPING</b>			
13. Supplies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Proper flow / operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Emergency shut-off valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Emergency shut-off valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Drain piping / flow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Anchored properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Pop-up assembly operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Insulation / heat tape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Shut-off / ease of operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Pressure reducing valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Faucet operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Shut-off valves tagged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>TUB / SHOWER UNIT &amp; FAUCET</b>					<b>SANITARY SYSTEM</b>			
19. Shower head	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Proper flow / operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Tub spout	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Leaks / corrosion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Handles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Clean-outs in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Diverter assembly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. Cover on FAV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Caulking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11. FAV proper height	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Stopper operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12. Back water / check valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Drain assembly / flow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>(G) OTHER</b>			
26. Shut-off / ease of operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>FIREPLACE</b>			
27. Faucet operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Gas service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>(B) LAUNDRY</b>					<b>RECOMMENDATIONS:</b>			
<b>FAUCET &amp; LAUNDRY TUB</b>					_____			
1. Aerator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
2. Faucet mounted / secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
3. Handles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
4. Drain flow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
5. Trap & tubular piping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
6. Supplies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
7. Emergency shut-off valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
8. Strainers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
<b>WASHING MACHINE</b>					_____			
9. Hoses / hot & cold	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
10. Hose strainers clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
11. Emergency shut-off valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
<b>DRYER</b>					_____			
12. Gas / electrical supply	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
13. Properly vented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
14. Vent clean / unobstructed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
<b>(C) BASEMENT / UTILITY</b>					_____			
<b>HOT WATER HEATER</b>					_____			
1. Emergency water shut-off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
2. Drain valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
3. Safety relief valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
4. Proper temperature range	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
5. Burner assembly clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
6. Gas / electric supply	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
7. Emergency gas shut-off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
8. Draft / ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
9. Flu piping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
10. CO2 detector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
<b>SUMP PUMP</b>					_____			
11. Pit clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
12. Pump operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
13. Discharge piping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
14. Check valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
15. Cover secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
16. Piping anchored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			
17. Back-up system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____			

See additional recommendations on a separate sheet.