



## Daily Water Line Inspection Log Sheet

Facility Name: \_\_\_\_\_ NPDES Permit No.: \_\_\_\_\_

**Instructions:**

- Initial the form *each day* after the inspection is complete
- If a leak is detected, place a check in the “leak detected” column

January, 20__		
Day	Initials	√ if Leak Detected
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February, 20__		
Day	Initials	√ if Leak Detected
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<b>March, 20____</b>		
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<b>April, 20____</b>		
Day	Initials	√ if Leak Detected

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<b>May, 20__</b>		
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<b>June, 20__</b>		
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<b>July, 20__</b>		
Day	Initials	√ if Leak Detected
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**August, 20\_\_**

Day	Initials	√ if Leak Detected
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**September, 20\_\_**

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October, 20__		
Day	Initials	√ if Leak Detected
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November, 20__		
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December, 20__		
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