LFWS Water Pipe Identification Form

Circle all that apply --- Turn in paper form after you've emailed results

Pic #1 Fill out first section then take pic

Inspection Date: **Time:** **Lot:** **Address:**

Owner Name: **Present: Y N**

LFWS Representative Present:

Pelletier Myers Giacobe Parrott

Nosach Boyd McCaskill

Pic #2 of SYSTEM side

LFWS Side of Meter: Visual Lead Swab Scratch test Magnet Sticks Yes No

Type of pipe: Plastic white black blue Galv Lead Copper

Picture #1 Picture #2 Picture #3 Picture #4 Picture #5 Picture #6

Pic #3 of Customer Side

Customer Side of Meter: Visual Lead Swab Scratch test Magnet Sticks Yes No

Type of pipe: Plastic white black blue Galv Lead Copper

Picture #1 Picture #2 Picture #3 Picture #4 Picture #5 Picture #6

Pic #4 of Interior

Interior Inspection: Visual Lead Swab Scratch test Magnet Sticks Yes No

Type of pipe: Plastic white black blue Galv Lead Copper

Picture #1 Picture #2 Picture #3 Picture #4 Picture #5 Picture #6

Last, take pic of completed form

Pictures and this form were sent to lfws166@gmail.com Yes No

Email sent by: Pelletier Myers Giacobe Parrott

Nosach Boyd McCaskill

email date if different from above:

Turn in your paper copy of this form after you've emailed it in