



MANHOLE INSPECTION FORM

Fill out form,
>Save to file<
Click Update
button =
Fills Summary
line page 2 &
Clears Form

Manhole ID:

Inspection Date:
Inspector:
Street Name:
Nearest Address #:
Manhole Depth:

Overall Rating (1 to 5):
(1=new ... 5=failing)

Inflow Infiltration Rate:
(0=none ... 5=gusher)

Conditions: Dry Wet Standing Water Frozen

MH DETAILS

Location:	Material:	MH Cover size:	MH Barrel size:	Direction Effluent:
Roadway <input type="checkbox"/>	Brick <input type="checkbox"/>	22" <input type="checkbox"/>	48" <input type="checkbox"/>	NW <input type="text"/>
Gutter <input type="checkbox"/>	Block <input type="checkbox"/>	24" <input type="checkbox"/>	60" <input type="checkbox"/>	
Paved Alley <input type="checkbox"/>	Concrete <input type="checkbox"/>	30" <input type="checkbox"/>	Other (below) <input type="checkbox"/>	# of Influent: <input type="text"/>
Unpaved Alley <input type="checkbox"/>	Lined <input type="checkbox"/>	36" <input type="checkbox"/>	<input type="checkbox"/>	
Easement <input type="checkbox"/>	Other <input type="checkbox"/>	Other (describe) <input type="text"/>	<input type="checkbox"/>	
Other (describe) <input type="text"/>				

CONDITION

Cover:	Ring & Frame	Cone & Riser:	Barrel:	Rungs:
Serviceable <input type="checkbox"/>	Serviceable <input type="checkbox"/>	Serviceable <input type="checkbox"/>	Serviceable <input type="checkbox"/>	Serviceable <input type="checkbox"/>
Loose <input type="checkbox"/>	Loose <input type="checkbox"/>	Cracked/Broken <input type="checkbox"/>	Cracked/Broken <input type="checkbox"/>	Unsafe <input type="checkbox"/>
Below Grade <input type="checkbox"/>	Displaced <input type="checkbox"/>	Corroded <input type="checkbox"/>	Corroded <input type="checkbox"/>	Missing any <input type="checkbox"/>
Damaged <input type="checkbox"/>	Missing Grout <input type="checkbox"/>	Misaligned <input type="checkbox"/>	Misaligned <input type="checkbox"/>	Corroded <input type="checkbox"/>
Sealed <input type="checkbox"/>	Raise <input type="checkbox"/>	Infiltration <input type="checkbox"/>	Infiltration <input type="checkbox"/>	N/A - no rungs <input type="checkbox"/>
Holes (# of holes) <input type="text"/>	Lower <input type="checkbox"/>	Roots at Joints <input type="checkbox"/>	Roots at Joints <input type="checkbox"/>	

Bench:	Channel:
Serviceable <input type="checkbox"/>	Serviceable <input type="checkbox"/>
Cracked/Broken <input type="checkbox"/>	Obstructed <input type="checkbox"/>
Bad base joint <input type="checkbox"/>	Bad joints <input type="checkbox"/>
	Roots at connection <input type="checkbox"/>

Hydraulics

Indications of Surcharge?:	Issues:
None <input type="checkbox"/>	Grease <input type="checkbox"/>
Minor <input type="checkbox"/>	Debris <input type="checkbox"/>
Yes, need followup <input type="checkbox"/>	Silt <input type="checkbox"/>
	Infiltration, if yes, note below <input type="text"/>
	(None, Minor, Some, Excessive) <input type="text"/>

Describe Flow:
Steady <input type="checkbox"/>
Pulsing <input type="checkbox"/>
Turbulent <input type="checkbox"/>
Surcharging <input type="checkbox"/>
Sluggish <input type="checkbox"/>

COMMENTS: