

**ST. JOHNS COUNTY UTILITY DEPARTMENT
2J - INSPECTION - LOCATE WIRE TEST REPORT**

PROJECT NAME: _____

LOCATION: _____

DATE: _____

CONTRACTOR: _____

Watermain Footage: _____

Street(s): _____

Station / Lot # Start: _____

Station End: _____

Forcemain Footage: _____

Street(s): _____

Station / Lot # Start: _____

Station End: _____

Reclaimed Watermain Footage: _____

Street(s): _____

Station / Lot # Start: _____

Station End: _____

Additional Notes:

Total Amount Tested: _____

Test Results: _____

Tested by (print and sign): _____

Inspector: _____

Email this completed form to Construction Technician ConstructTech@sjcfl.us. Call 904-209-2618 with questions.