



AS BUILT DRAINAGE PLAN

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Owner _____

BC Number _____

Site address _____

Val Ref _____

Telephone _____

Mobile phone _____

PERSON UNDERTAKING WORK

Drainlayer _____

Registration number _____

Company or business _____

Company address _____

Nature of the work

| | |
|---|--------------------------------------|
| <input type="checkbox"/> New work | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Additions to existing drains | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Alterations to existing drains | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Connection to sewer | |

DRAINAGE PLAN TO INCLUDE : (please ensure that the all of the following are indicated on the plan provided)

As built drainage plan to include

| | |
|---|--|
| <input type="checkbox"/> North point, with the direction of north indicated | <input type="checkbox"/> The location of all inspection access fittings |
| <input type="checkbox"/> Name of the street/road frontage | <input type="checkbox"/> Exact location of connection between drains and sewer |
| <input type="checkbox"/> Outline of all buildings, including building lengths | <input type="checkbox"/> Location of water lines, in RED PEN please |
| <input type="checkbox"/> The boundaries of the property | <input type="checkbox"/> Scale of Plan |

INSPECTION :

Date of work completed _____

Date of inspection _____

Tradesperson _____

BUILDING CONTROL OFFICER : _____

