**Location: Date:**

**From: Taken by:**

**Complaint**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Missing |  | Turbidity |  | Low Pressure | |  |  |
|  | Taste |  | Organisms |  | High Pressure | |  |  |
|  | Odor |  | Noise |  | Other: |  |  |  |
|  | Colour |  | No Water |  |  | |  |  |
|  |  |  |  |  |  | |  |  |

**Investigation: (List all applicable items)**

**Cause:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Emergency |  | Pump Failure |  | Customer Line Stoppage | | | |
|  | Water Outage |  | Dead-End Main |  | Pipe too Small | |  |  |
|  | Power Outage |  | Water Surges |  | Other: |  |  |  |
|  |  |  | Regulator Failed |  |  | |  |  |
|  |  |  |  |  |  | |  |  |

**Explain:**

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**Correction:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | No Action Required | | Under Investigation | |  |  |
|  | Controls Repaired | | Planned Shutdown | |  |  |
|  | Customer to Correct | | Customer Not Notified | | | |
|  | Main Flushed |  | Other: |  |  |  |
|  |  |  |  | |  |  |

**Explain:**

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**Additional Information:**

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Investigators: Date:

Investigators: Date: