|  |  |
| --- | --- |
| **Source Name** |  |
| **Inspection Report** |
| **Date** | **Shoreline Inspection** | **Raw Water****Tested** | **Watershed****Inspection** | **Visual****Inspection****Intake** | **Action Required** | **Date Action****Completed** |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |
|  |  Yes No |  Yes No |  Yes No |  Yes No |  |  |

ACKNOWLEDGEMENT

 Date:

Operator

 Date:

Town Manager/Administrator

 Date:

Council