



ROCHESTER

— *Minnesota* —



DEPARTMENT OF PUBLIC WORKS
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(507) 328-2400
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MANHOLE VACUUM AND PRESSURE TEST

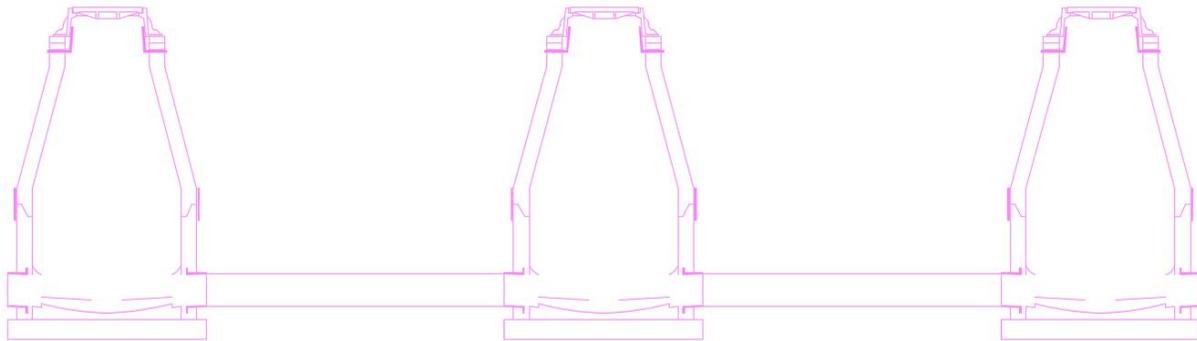
Date

Consultant or Engineer

Project Name

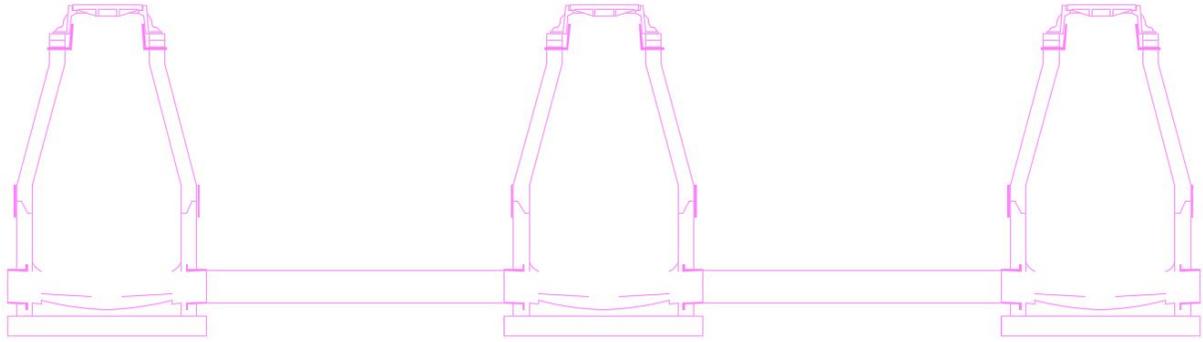
Project Numbers

Submitted By



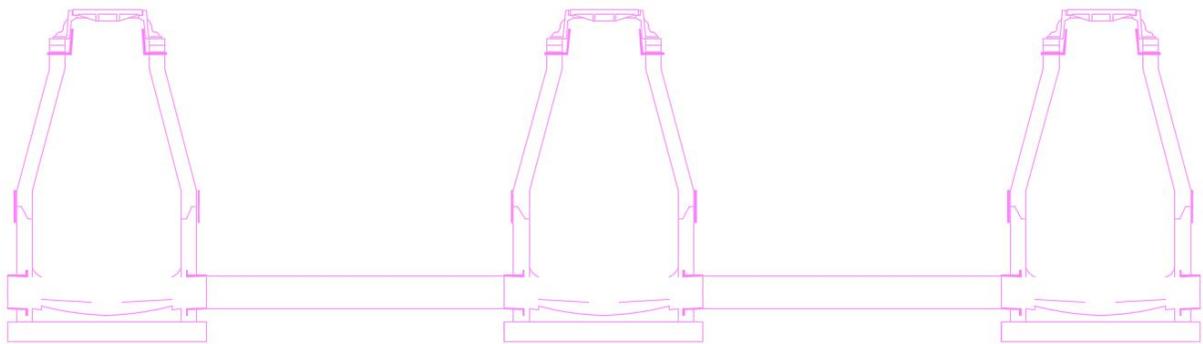
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STRUCTURE ID	INITIAL DEFLECTION TEST	STRUCTURE ID	INITIAL DEFLECTION TEST	STRUCTURE ID
_____	_____	_____	_____	_____
VACUUM TEST	PRESSURE TEST	VACUUM TEST	PRESSURE TEST	VACUUM TEST
_____	_____	_____	_____	_____
TUCK POINTED	30 DAY DEFLECTION TEST	TUCK POINTED	30 DAY DEFLECTION TEST	TUCK POINTED
_____	_____	_____	_____	_____
SITE REPRESENTATIVE	SITE REPRESENTATIVE	SITE REPRESENTATIVE	SITE REPRESENTATIVE	SITE REPRESENTATIVE

Comments:



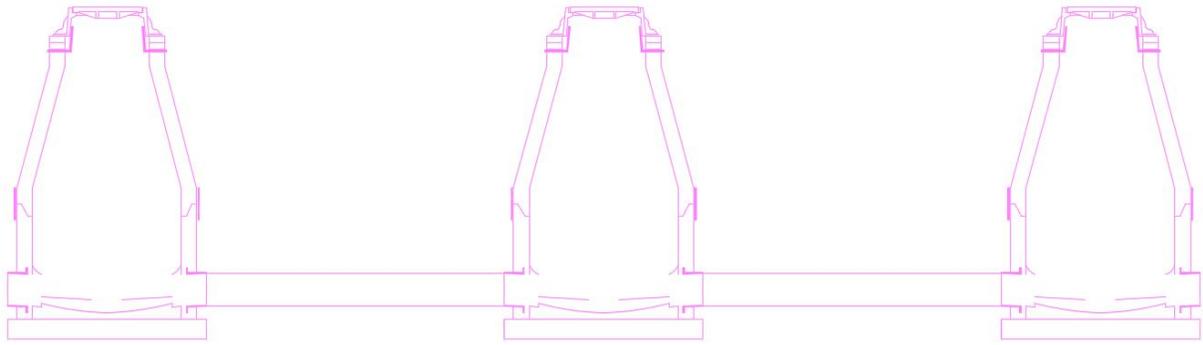
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VACUUM TEST	PRESSURE TEST	VACUUM TEST	PRESSURE TEST	VACUUM TEST
TUCK POINTED	30 DAY DEFLECTION TEST	TUCK POINTED	30 DAY DEFLECTION TEST	TUCK POINTED
SITE REPRESENTATIVE	SITE REPRESENTATIVE	SITE REPRESENTATIVE	SITE REPRESENTATIVE	SITE REPRESENTATIVE

Comments:



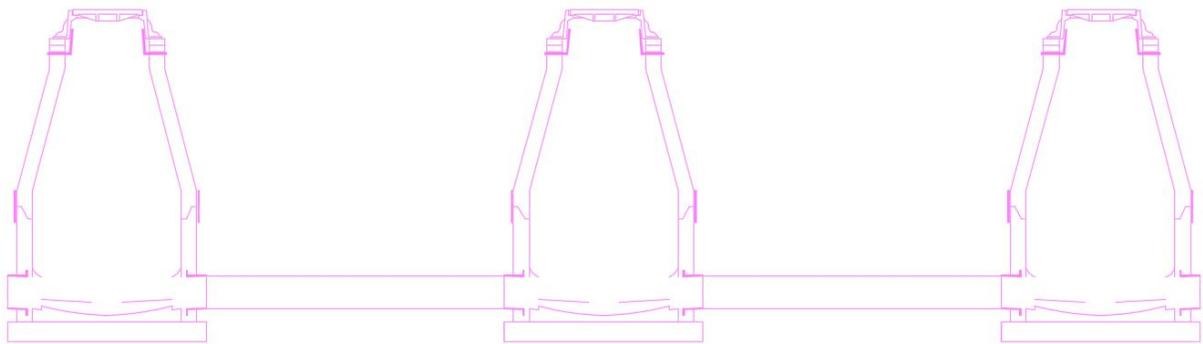
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Comments: