



TOWN OF EDSON

3240 – 1 Avenue
P.O. Box 6300
Edson, Alberta, T7E 1T7
Phone: (780) 723-6461
Fax: (780) 723-7188

Request for Weeping Tile Inspection

Applicants Name		Telephone	Cell Phone	Fax
Street Address:				
Development Permit Number				
Plan	Block		Lot	

I hereby request the Town of Edson to conduct a Weeping Tile Inspection on the above property on the _____ day of _____ at or about the following time: _____.

Applicant Signature : _____ Date: _____

FOR OFFICE USE ONLY

- A. Is weeping tile installed in the development? Yes No
- B. Is weeping tile connected to a sump? Yes No N/A
- C. Are the sump pump and discharge pipe installed? Yes No N/A
- D. The discharge of the weeping tile is to: Ground Level Sanitary Sewer Storm Sewer

Comments: _____

Date: _____

Director of Operations

- Original to Land File Copy to Utilities Supervisor Copy to Applicant