



# 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

<b>Applicants Name</b>		<b>Telephone</b>	<b>Cell Phone</b>	<b>Fax</b>
<b>Street Address:</b>				
<b>Development Permit Number</b>				
<b>Plan</b>	<b>Block</b>		<b>Lot</b>	

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