



MIAMI-DADE WATER AND SEWER DEPARTMENT
PLANS REVIEW CHECKLIST FORM

Instructions: The Engineer of Record must fill out this form and check the boxes for the items required to submit the plans. This list is intended to be submitted as a statement or affirmation regarding the items listed. This checklist is required to be signed.
 CHECKLIST FORMS WILL NOT BE ACCEPTED IF THE NECESSARY INFORMATION AND SIGNATURES ARE NOT PROVIDED

DRY-RUNS DROP OFF:

CHECK

One (1) set of Plans with Location Sketch, GS 0.5 Note and Blanket form <i>(if applicable)</i> filled out by the customer.	<input type="checkbox"/>
One (1) set of Plans with Location Sketch, GS 0.5 Notes and Agreement ID <i>(if applicable)</i> .	<input type="checkbox"/>

FINAL PLANS DROP-OFF:

Fifteen (15) sets of Plans Signed and Sealed by Engineer of Record for water and/or sewer extension or ten to twelve (10-12) sets for Water Blankets.	<input type="checkbox"/>
Ten to twelve (10-12) sets of Plans for Sewer Blankets signed by a Certified General Contractor in the State of Florida. Plans are not required to be signed and sealed by a Professional Engineer.	<input type="checkbox"/>
FDEP Applications <i>(Only For Agreements)</i>	<input type="checkbox"/>
Five (5) Original sets for Water	<input type="checkbox"/>
Three (3) Original sets for Sewer	<input type="checkbox"/>
Reviewed Dry-Runs with notations and reviewed Blanket <i>(if applicable)</i>	<input type="checkbox"/>

TURBINE METER PLANS DROP-OFF:

Three (3) sets of Plans with details of the Turbine Meter attached.	<input type="checkbox"/>
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PUMP STATION PLANS DROP-OFF:

Eight (8) sets of Plans.	<input type="checkbox"/>
Calculations Signed and Sealed by Engineer of Record.	<input type="checkbox"/>
Fifteen (15) sets of Plans for Final after review.	<input type="checkbox"/>
<i>ONCE PUMP STATIONS PLANS ARE APPROVED, SUBMIT THE FOLLOWING:</i>	
Eight (8) sets of Shop Drawings.	<input type="checkbox"/>

I HAVE REVIEWED THE PLANS TO ENSURE THAT THEY MEET THE MINIMUM WASD REQUIREMENTS.

Name _____ Date _____ Signature _____
 (print name of Engineer of Record)

CONTACT INFORMATION			
E-MAIL		PHONE #	
PRINT NAME		TITLE	
SIGNATURE		DATE	