



City of Port St Lucie Utility Systems Department

Utility Facility Turnover Packet Content List

Project Name \_\_\_\_\_ PSLUSD File No. \_\_\_\_\_

Date Turnover Package Received for Review \_\_\_\_\_

EOR  
Initials

01. Final Passing Utility Inspection Date: \_\_\_\_\_

02. Test Reports (If Applicable)  
Bacteriological Clearance (Less than 60 days old)   
Water Pressure Test (Signed & Sealed by EOR)   
Sewer Pressure Test (Signed & Sealed by EOR)   
Exfiltration/Infiltration Test (For Gravity) (Signed & Sealed by EOR)   
Telespection DVD/Tape (For Gravity)   
1 Lift Station/Grinder O & M Manuals with Startup Report   
Backflow Device Certification (Per Meter)   
New/Existing Grease Interceptors (Current inspection results and/or cleanout records)   
Hydrant Flow Test (If Applicable)

03. Bill of Sale (On City's Standard Form) With:   
Exhibit A - Legal Description  
Exhibit B - Material List (Signed & Sealed by EOR)

04. Contractor's Affidavit & Release of Lien (On City's Standard Form)

05. Material & Installation Warranty for One Year   
(On City's Standard Form, printed on Contractor's Letterhead)

06. Owner's Affidavit (On City's Standard Form)   
Exhibit A - Legal Description

07. Utility Easement Documents (On City's Standard Form) With   
Legal Description and Parcel ID Number  
Signed & Sealed Sketch with Legal Description of Easement or Recorded Plat

08. As-Built Drawing (Signed & Sealed by Professional Surveyor)   
1 Black or Blue Line Set (Utility Sheet Only)   
1 CD of PDF Files (Utility Sheets Only)   
1 CD of AutoCAD with Standard AutoCAD font (entire project)

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**09. Inspection Overtime/Re-Inspection Fees**

Overtime Fees

Re-Inspection Fees

Other Fees Explain: \_\_\_\_\_


**10. Pump Station Data Sheet** (If Applicable)

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**11. FDEP Certification of Completion Forms**

Water (If Required)

Sewer (If Required)


**12. Fire Hydrant Repair Kit** (If Applicable)

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**13. Lift Station Repair Kit** (If Applicable)

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**14. As Built Certification** (Appendix 'E' ) (On City's Standard Form)

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**15. Gate Codes and Contact Information** (If Applicable)

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**16. Utility Facility Turnover Packet Content List** (This form, Signed by EOR)

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\_\_\_\_\_  
Engineer of Record Name Printed

\_\_\_\_\_  
Engineer of Record Signature

\_\_\_\_\_  
Date