

AECOM

Sub-Slab and Sub-Membrane Depressurization System

Annual OM&M Inspection Form

Property Address:	_____	Temperature (Ambient)	_____	F
Tenant's Name:	_____	Temperature (House)	_____	F
Owner's Name:	_____	Barometric Pressure	_____	"Hg
Owner's Address (If Different from Property)	_____	Weather Conditions:	_____	
Inspector Name:	_____		_____	
Date:	_____		_____	
Time:	_____		_____	

Exterior System Inspection

Is fan intact and operational?	yes	no
Any unusual fan vibrations?	yes	no
Is vent piping/downspout intact?	yes	no
Any caulking required around fan and piping connections?	yes	no

Interior System Inspection

Any heaving or subsidence at suction point?	yes	no
Any whistling noises noted?	yes	no
Caulk seals inspected?	yes	no
Cracking or Separation of piping joints?	yes	no

Tenant Observations

Any change in fan noise or vibration?	yes	no	
Any lack of differential pressure in the manometer?	yes	no	
Have you turned the fan off for any period of time?	yes	no	Reason? _____
Have you or the owner made any changes to the basement?	yes	no	
If so, what were the changes:	_____		

Measurements

System Manometer Reading	_____ "H <sub>2</sub> O	Initial System Manometer Reading	_____ "H <sub>2</sub> O
Vacuum Point 1	_____ "H <sub>2</sub> O	Vacuum Point 1	_____ "H <sub>2</sub> O
Vacuum Point 2	_____ "H <sub>2</sub> O	Vacuum Point 2	_____ "H <sub>2</sub> O
Vacuum Point 3	_____ "H <sub>2</sub> O	Vacuum Point 3	_____ "H <sub>2</sub> O
Vacuum Point 4	_____ "H <sub>2</sub> O	Vacuum Point 4	_____ "H <sub>2</sub> O

Is the System Manometer Steady?      yes      no

**Comments (any repairs made while visiting, etc...):**