

**General Inspection Procedures  
Kentucky American Water  
December 20, 2017**

Kentucky American Water follows inspection procedures that are in compliance with the required inspections in 807 KAR 5:006, Section 26(6) and conform with American Water policies and practices as may be revised from time to time. Sample Inspection forms are attached to this document and may be revised as appropriate. Records indicating the inspections are completed will be retained by the appropriate operational department, available for review at any time. The following inspections are included:

<b>Item</b>	<b>Description</b>	<b>KAW Inspection</b>	<b>Minimum Required</b>
1	Meters – new	Prior to installation from vendor	Prior to installation
2	Meters and meter settings – ongoing	Monthly using AMR data As needed based on AMR data readings	Deviation granted in Case No. 2016-00394 from annual to monthly using AMR data
3	Master Meters	Monthly using AMR data Field tested based on testing requirements from 807 KAR 5:066	Deviation granted in Case No. 2016-00394 from annual to monthly using AMR data
4	Tanks (includes distribution system elevated tanks, ground storage tanks, above ground clearwells and all pumps, motors, electrical power wiring and controls, vaults and buildings located at the tank site)– site inspection	Monthly	Annually
5	Tanks – structural/coating inspection	Periodic – third party	
6	Treatment Plants – (currently Richmond Road Station, Kentucky River Station 1 and Kentucky River Station 2 and any future treatment plants) – includes all equipment, buildings, sedimentation basins, filters, clearwells, chemical feed equipment, electrical power wiring and controls, pumping equipment, water storage, intakes and travelling screens	Monthly – treatment plant operator Quarterly – Management Team	Annually
7	Buildings - other than at treatment plant or tank sites	Annually	Annually
8	Safety equipment including AED and fire extinguishers	Monthly	

9	Pumping Equipment – raw water and finished water	Monthly	Semi annually
10	Backup power generators	Monthly – internal Quarterly – third party inspection and testing	Semi annually
11	Water treatment laboratories – (currently Richmond Road Station, Kentucky River Station 1, and Kentucky River Station 2 and any future laboratories)	Monthly	
12	Fire Hydrants and 6” hydrant valve	Annually (inspection records electronically)	Annually
13	Distribution System Valves – 30” and larger, critical treatment plant valves	Annually (inspection records electronically)	Annually
14	Distribution System Valves – 16” to 24”	Every 2 years (inspection records electronically)	Deviation granted in Case No. 2016-00394 from annual to every 2 years
15	Distribution Valves 12” and smaller other than hydrant valves	Every 5 years (inspection records electronically)	Deviation granted in Case No. 2016-00394 from annual to every 5 years
16	Jacobson Reservoir Dam – seepage inspection Site Inspection High Hazard Structural Inspection with Department of Natural Resources Dam Inspection personnel	Monthly  Annually Every 2 years	Annually for site inspection
17	Vehicles – DOT including construction equipment and vehicles	Daily	Monthly
18	Vehicles – Non-DOT	Daily before use	Monthly

**Plant, Tank, Booster, or Pump Station/Facility Walk - Thru**

<b>Division/District:</b>		<b>Date:</b>		<b>Time:</b>	
<b>Facility:</b>					
<b>Inspectors:</b>					
<b>Housekeeping</b>					
Grounds					
Intake					
Discharge Locations					
Facility					
Storage Areas					
Equipment and Chemical Areas					
Lab Areas					
ERP, RMP, BMP, Inspection Reports					
Other					
<b>Motors, Pumps and Equipment</b>					
Shaft guarding					
Hearing Protection Signs					
Other					
<b>Chlorination and Chemical Areas</b>					
Exhaust Fan Operational					
Hazard Communication Info.					
Chlorine Warning Signs					
SCBA/Respirators Available					
Flows/Color Coded					
Chlorine Leak Alarm					
Light Fixtures Guarded					
Repair Kits Available					
Containment Areas					
Shower and Eyewash					
Protective Equip Available					
Other					
<b>Pits, Vaults and Manholes</b>					
Ladder					
Light Fixtures Guarded					
Ventilation					
Confined Space Posting					
Cover Present					
Locks					
Painting Req.					
Other					
<b>Electrical/Fire Safety</b>					
Wiring Exposed					
Voltage/Arc Flash signs					
Insulation Mats					
Extension Cords					
Switchboards					
Transformers					
Fence/grounded					
Lockout/Tagout Posted					

**Plant, Tank, Booster, or Pump Station/Facility Walk - Thru**

<b>Division/District:</b>		<b>Date:</b>		<b>Time:</b>		
<b>Facility:</b>						
<b>Inspectors:</b>						
Protective Gear						
Fire Extinguisher(s)						
Other						
<b>Walkways, Stairs, Platforms, Floor Openings, Hatches and Doors</b>						
Clear of Obstruction						
Lighting						
Access Hatches						
Ladder: Cage, Climbing Rail						
Handrails/Guardrails						
Fall Protection						
Exits Marked						
Other						
<b>Security</b>						
Gates/Locks						
Fences						
<b>Recommendation(s)</b>						
Number of Item	Item to be Addressed	Person Responsible	Original Due Date	New Due Date	Reason for Change	Completed

Remove from list next quarter



<b>Nashville, TN</b> 1515 J.P. Hennessey Dr. La Vergne, TN 37086 Main Phone # (615) 244-0650 Main Fax # (615) 244-0689	<b>Atlanta, GA</b> 1440 Lakes Parkway Suite 600 Lawrenceville, GA 30043 Main Phone # (770) 448-6687 Main Fax # (770) 448-6535	<b>Louisville, KY</b> 11910 Carrier Court Louisville, KY 40299 Main Phone # (502) 267-0474 Main Fax # (502) 267-9166	<b>Blountville, TN</b> 1612 Highway 75 Blountville, TN 37617 Main Phone # (423) 279-0357 Main Fax # (423) 279-0846	<b>Charlotte, NC</b> 3101 Yorkmont Rd. Suite 100 Charlotte, NC 28208 Main Phone # (704) 588-1043 Main Fax # (704) 588-8373
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**Customer:** \_\_\_\_\_ **Location:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **RO# :** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Hours:** \_\_\_\_\_  
**Eqpt. S/N:** \_\_\_\_\_ **Eqpt. M/N:** \_\_\_\_\_ **Eqpt. Spec:** \_\_\_\_\_  
**Eng. S/N:** \_\_\_\_\_ **Eng. M/N:** \_\_\_\_\_ **Eng. Spec:** \_\_\_\_\_  
**Type service:** **Major(M)** \_\_\_\_\_ **Minor(m)** \_\_\_\_\_ **Other** \_\_\_\_\_

**FUEL SYSTEMS CHECKS:**

- \_\_\_\_\_ General inspection of all components [M/m]
- \_\_\_\_\_ Change fuel filter elements [M]
- \_\_\_\_\_ Check for water in main tank (DSL only)
- \_\_\_\_\_ Take fuel sample [M] (DSL only)
- \_\_\_\_\_ Check for water in day tank [M] (DSL only)
- \_\_\_\_\_ Drain fuel/water separator [m] (DSL only)
- \_\_\_\_\_ Check level in main tank [M/m]
- \_\_\_\_\_ Fuel Level \_\_\_\_\_
- \_\_\_\_\_ Operation of day tank [M/m] (DSL only)
- \_\_\_\_\_ Check Fuel Pressure [M/m](Gas only)

**LUBRICATING SYSTEMS CHECKS:**

- \_\_\_\_\_ Change engine oil [M]
- \_\_\_\_\_ Change engine oil filter [M]
- \_\_\_\_\_ Change governor oil filter [M]
- \_\_\_\_\_ Engine oil pressure [M]
- \_\_\_\_\_ Engine oil level [M/m]
- \_\_\_\_\_ Check for oil leaks [M/m]
- \_\_\_\_\_ Oil analysis [M]

**COOLING SYSTEMS CHECKS:**

- \_\_\_\_\_ Check water pump [M/m]
- \_\_\_\_\_ Cooling system hoses [M/m]
- \_\_\_\_\_ Check louvers [M/m]
- \_\_\_\_\_ Adeq. Fresh air to equip. [M/m]
- \_\_\_\_\_ Check radiator core [M/m]
- \_\_\_\_\_ Check radiator cap [M/m]
- \_\_\_\_\_ Coolant level [M/m]
- \_\_\_\_\_ Check freeze point [M/m]

**COOLING SYSTEMS CHECKS: CONT**

- \_\_\_\_\_ Change coolant filter [M]
- \_\_\_\_\_ Test antifreeze, add inhibitor if needed[M]
- \_\_\_\_\_ Check belts [M/m]
- \_\_\_\_\_ Condition of fan hub [M/m]
- \_\_\_\_\_ Operation of water jacket [M/m]
- \_\_\_\_\_ Operating water temp. [M/m]
- \_\_\_\_\_ Perform non-contact temp. measurement [M/m]

**EXHAUST SYSTEMS CHECKS:**

- \_\_\_\_\_ Condition of exhaust system [m/m]
- \_\_\_\_\_ Condition of turbocharger [M/m]
- \_\_\_\_\_ Exhaust leaks [M/m]
- \_\_\_\_\_ Check exhaust rain shield [M/m]
- \_\_\_\_\_ Check for wet stacking [M/m] (DSL only)

**CONTROL SYSTEMS CHECKS:**

- \_\_\_\_\_ Oper. Of all gauges and meters [M/m]
- \_\_\_\_\_ Clean control cabinet [M/m]
- \_\_\_\_\_ Oper.of all controls [M/m]
- \_\_\_\_\_ Shutdown system [M/m]
- \_\_\_\_\_ Indicator & panel lamps [M/m]
- \_\_\_\_\_ Check/adjust frequency [M/m]
- \_\_\_\_\_ Check/adjust voltage [M/m]

**AIR INTAKE SYSTEMS CHECKS:**

- \_\_\_\_\_ Air inlet restriction [M]
- \_\_\_\_\_ Check breather tube [M/m]
- \_\_\_\_\_ Drain air box reservoir [M/m]
- \_\_\_\_\_ Air system piping [M/m]
- \_\_\_\_\_ Condition of dry type cleaner [M/m]
- \_\_\_\_\_ Service oil bath air cleaner [M/m]

**ENGINE ELEC.SYSTEMS CHECKS:**

- \_\_\_\_\_ Condition of batteries [M/m]
- \_\_\_\_\_ Clean batteries and cables [M/m]

**ENGINE ELEC.SYSTEMS CHECKS:**

- \_\_\_\_\_ Check specific gravity [M/m]
- \_\_\_\_\_ Add distilled water [M/m]
- \_\_\_\_\_ Operation of float charger [M/m]
- \_\_\_\_\_ Battery voltage under load [M/m]
- \_\_\_\_\_ Change spark plugs, points, and condenser [M]
- \_\_\_\_\_ Change rotor, and cap if needed [M]

**GENERATOR CHECKS:**

- \_\_\_\_\_ Vacuum debris [M]
- \_\_\_\_\_ Check condition of bearing [M]
- \_\_\_\_\_ Circuit breaker operation [M/m]
- \_\_\_\_\_ Cond. of AC and DC
- \_\_\_\_\_ Perform non-contact temp meas. |

**TRANSFER SWITCH CHECKS:**

- \_\_\_\_\_ Visual inspection of condition [M/m]
- \_\_\_\_\_ Vacuum debris [M/m]
- \_\_\_\_\_ Check lights [M/m]
- \_\_\_\_\_ Perform transfer test [M]
- \_\_\_\_\_ Visually inspect linkage for binding[M]
- \_\_\_\_\_ Perform non-contact temp meas [M/m]

**GENERAL CHECKS:**

- \_\_\_\_\_ Check for unusual cond.,vibration deterioration, leakage, high temp, or noise [M/m]
- \_\_\_\_\_ Visually inspect annunciator [M/m]
- \_\_\_\_\_ Run gen. in emrg. or test [M/m]
- \_\_\_\_\_ Record all readings and present to customer [M/m]
- \_\_\_\_\_ Verify control panel in automatic mode [M/m]
- \_\_\_\_\_ Verify all breakers are reset [M/m]
- \_\_\_\_\_ Notify customer of additional service work needed [M/m]

REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- / -- CHECKED OK
- X -- NEEDS REPAIRS
- N -- NEEDS REPLACING
- R -- REPLACED
- N/A-- NOT APPLICABLE

- Materials removed from site
- Used oil: \_\_\_\_\_
- Used antifreeze: \_\_\_\_\_
- Used batteries: \_\_\_\_\_

Customer Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

P.O. # \_\_\_\_\_

Technician: \_\_\_\_\_

## Hydrant Inspections : Creating

Hydrant HLX-6265

Location LOCATED ON PRESCOTT LN APPROXIMATELY 186 S SCL STOCKTON WAY

Date Inspected 12/18/2017 10:17 AM

Inspection Type \* -- Select --

Full Flow -- Select --

GPM

Minutes Flowed

Static Pressure

Residual/Free Chlorine

Total Chlorine

Hydrant Tag Status -- Select --

Problem -- Select --

Remarks

SAP Error Code

SAP Notification Number

Save

Cancel

## Valve Inspections : Creating

### Inspection Data

Valve VLX-6992

Valve Location LOCATED 1.08' E ECL WORSHAM CT FROM 41' N NCL VALLEY FARM DR

Date Inspected 12/18/2017 10:18 AM

Operated \* -- Select --

Position Found -- Select --

Position Left -- Select --

Open Direction Right

Normal Position Open

Number of Turns 20.5

Number of Turns Completed \*

Minimum Required Turns 5

Accept even if Min Req Turns not   
completed \*

SAP Error Code

SAP Notification Number

Remarks





## Kentucky American External Property Inspection Form

Location: \_\_\_\_\_ Inspector: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Inspection Area	Positive	Negative	N/A	Notes
Access Road(s)				
Is Grass Cut				
Exterior Appearance				
Interior Appearance				
Fencing Condition				
Gate(s)				
Locks				
Signs				
Exterior Lights				
Tank(s) Structural Condition				
Tank(s) Paint Condition				
Overflow Air Gap(s)				
Tank(s) Ladder				
Ladder(s) Cage				
Tank(s) Platform				
Tank(s) Access Hatches				
Vault(s) Ladder				
Is Vault(s) Dry				
General Electrical Condition				
Emergency Lights				
Diesel Tank(s) & Piping				
Heater(s)				
Covers, Safety Issues				
First Aid Kit(s)				
Spill Kit(s)				
Inspect Eye Wash Station(s)				
Sign Eye Wash Station(s) Tag				
Inspect Fire Extinguisher(s)				
Sign Fire Extinguisher(s) Tag				
Exhaust Fan(s)				
Inspect Hoist(s)				
Sign Hoist(s) Tag				
Is Gate(s) Closed				
<b><u>Additional Remarks:</u></b>				
<b><u>Any Safety Concerns?</u></b>				

# DRIVER'S VEHICLE INSPECTION REPORT

AS REQUIRED BY THE D.O.T. FEDERAL MOTOR CARRIER SAFETY REGULATIONS

CARRIER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.

CHECK ANY DEFECTIVE ITEM AND GIVE DETAILS UNDER "REMARKS"

**TRACTOR/  
TRUCK NO.** \_\_\_\_\_ **ODOMETER READING** \_\_\_\_\_

- |   |                                       |  |
|---|---------------------------------------|--|
| <input type="checkbox"/> Air Compressor     | <input type="checkbox"/> Front Axle   | <input type="checkbox"/> Safety Equipment  |
| <input type="checkbox"/> Air Lines          | <input type="checkbox"/> Fuel Tanks   | Fire Extinguisher                          |
| <input type="checkbox"/> Battery            | <input type="checkbox"/> Horn         | Flags/Flares/Fusees                        |
| <input type="checkbox"/> Belts and Hoses    | <input type="checkbox"/> Lights       | Reflective Triangles                       |
| <input type="checkbox"/> Body               | Head/Stop                             | Spare Bulbs and Fuses                      |
| <input type="checkbox"/> Brake Accessories  | Tail/Dash                             | Spare Seal Beam                            |
| <input type="checkbox"/> Brakes, Parking    | Turn Indicators                       | <input type="checkbox"/> Starter           |
| <input type="checkbox"/> Brakes, Service    | Clearance/Marker                      | <input type="checkbox"/> Steering          |
| <input type="checkbox"/> Clutch             | <input type="checkbox"/> Mirrors      | <input type="checkbox"/> Suspension System |
| <input type="checkbox"/> Coupling Devices   | <input type="checkbox"/> Muffler      | <input type="checkbox"/> Tire Chains       |
| <input type="checkbox"/> Defroster/Heater   | <input type="checkbox"/> Oil Pressure | <input type="checkbox"/> Tires             |
| <input type="checkbox"/> Drive Line         | <input type="checkbox"/> Radiator     | <input type="checkbox"/> Transmission      |
| <input type="checkbox"/> Engine             | <input type="checkbox"/> Rear End     | <input type="checkbox"/> Trip Recorder     |
| <input type="checkbox"/> Exhaust            | <input type="checkbox"/> Reflectors   | <input type="checkbox"/> Wheels and Rims   |
| <input type="checkbox"/> Fifth Wheel        |                                       | <input type="checkbox"/> Windows           |
| <input type="checkbox"/> Fluid Levels       |                                       | <input type="checkbox"/> Windshield Wipers |
| <input type="checkbox"/> Frame and Assembly |                                       | <input type="checkbox"/> Other             |

**TRAILER(S) NO.(S)** \_\_\_\_\_

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Brake Connections   | <input type="checkbox"/> Hitch                      | <input type="checkbox"/> Suspension System |
| <input type="checkbox"/> Brakes              | <input type="checkbox"/> Landing Gear               | <input type="checkbox"/> Tarpaulin         |
| <input type="checkbox"/> Coupling Devices    | <input type="checkbox"/> Lights - All               | <input type="checkbox"/> Tires             |
| <input type="checkbox"/> Coupling (King) Pin | <input type="checkbox"/> Reflectors/Reflective Tape | <input type="checkbox"/> Wheels and Rims   |
| <input type="checkbox"/> Doors               | <input type="checkbox"/> Roof                       | <input type="checkbox"/> Other             |

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CONDITION OF THE ABOVE VEHICLE IS SATISFACTORY

DRIVER'S SIGNATURE: \_\_\_\_\_

ABOVE DEFECTS CORRECTED

ABOVE DEFECTS NEED NOT BE CORRECTED FOR SAFE OPERATION OF VEHICLE

MECHANIC'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DRIVER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**ORIGINAL**

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