



Tanker Inspection Form

914 E North Foothills Dr Spokane, WA 99207 | 509-625-7800

DATE:

Company name	
Contact person	
Company address	
City, State, zip	
Phone	
Email	
Vehicle make model	
VIN number	
Inlet pipe diameter (fill pipe)	
Air gap horizontal separation (inches)	
Backflow Preventer	MAKE: _____ MODEL: _____ Received Test Report: Yes No
Backflow Serial Number	
Name of person inspecting and CCS or BAT #	
Air Gap	Pass Fail
Hydrant permit #	