PWD Stormwater Plan Review Infiltration Testing Log

Version 1 *7/1/2015*

Project Name: _____ **Date:** _____
Project Address: _____ **Weather:** _____
Testing Company: _____ **Tester's Name:** _____
Phone Number: _____ **Email Address:** _____

Test Number: _____ **Test Pit/Boring Hole Number:** _____ **Test Method:** _____
Test Depth (feet): _____ **Surface Elevation (feet):** _____ **Instrument Diameter (inches):** _____

Soil Characterization

Depth (feet):	Soil Texture:	Limiting Layers Type and Depth (feet):

Presoak

Time:	Time Interval:	Measurement, (feet):	Drop in water level, (feet):
	0		
	30		
	30		

Infiltration Testing

Time:	Time Interval (10 or 30 minutes):	Measurement, (feet):	Drop in water level, (feet):	Infiltration rate (inches per hour):	Remarks:
	0				

Stabilized Infiltration Testing Rate (inches per hour): _____