## DYE TEST LOG

### Project:

**Purpose for test:**
- [ ] Renovation
- [ ] New Construction
- [ ] Other:

**LOCATION DYE OBSERVED:**

<table>
<thead>
<tr>
<th>#</th>
<th>Fixture / Description / Location</th>
<th>Color</th>
<th>&quot;In-time&quot;</th>
<th>&quot;Out-time&quot;</th>
<th>Storm</th>
<th>Sanitary</th>
<th>Grease Trap</th>
<th>Manhole #</th>
<th>Other Information / Notes</th>
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**Please sign below**

- **Dye Test Conducted By:**
  - PRINTED NAME
  - SIGNATURE
  - DATE
- **Mechanical Subcontractor:**
  - PRINTED NAME
  - SIGNATURE
  - DATE
- **General Contractor Representative:**
  - PRINTED NAME
  - SIGNATURE
  - DATE
- **Commissioning Authority:**
  - PRINTED NAME
  - SIGNATURE
  - DATE
- **Owner’s Designated Representative:**
  - PRINTED NAME
  - SIGNATURE
  - DATE
- **UEM/FS/EHS Representative:**
  - PRINTED NAME
  - SIGNATURE
  - DATE