PORT ST. LUCIE UTILITY SYSTEMS DEPARTMENT
DEFLECTION TEST REPORT

Equipment Used Mandrel ☐
Calibrated Laser Camera ☐ Date Calibrated: _____

Project Name _____

PSLUSD Project Number _____

Engineer of Record _____

Project Contractor _____

Date Tested _____

Main Diameter	Main Length	From Structure	To Structure	Pass or Fail

Date _____ 30 Days after backfill? _____

Start Time: _____ End Time: _____

Engineer _____

Signature Date