



**Lift Station  
Engineer's Certification**  
(101203)

Public Works and Environmental Services Department  
**WATER AND WASTEWATER SERVICES - ENGINEERING**  
2555 West Copans Road  
Pompano Beach, FL 33069  
Phone: (954) 831-0745  
Fax: (954) 831-0798/0925

Pump Station ID: \_\_\_\_\_ Date: \_\_\_\_\_

Project Name: \_\_\_\_\_ Project Number: \_\_\_\_\_

Pump Manufacturer/Model: \_\_\_\_\_ Pump H.P.: \_\_\_\_\_

Control Panel Manufacturer: \_\_\_\_\_ Control Panel Max H.P.: \_\_\_\_\_

FPL Meter No.: \_\_\_\_\_ Account No.: \_\_\_\_\_

I hereby certify that the above referenced equipment/systems have been:

- ☐ Installed in accordance with the Contract Documents.
- ☐ Manufacturer's Start-up has been witnessed.
- ☐ Broward County approved sign installed.
- ☐ Project appears to be complete and ready for operation.
- ☐ O & M Manuals and training supplied

Comments:

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WWS Representative: \_\_\_\_\_  
(Print Name) (Date)

WWOD Pump Station Representative: \_\_\_\_\_  
(Print Name) (Date)

WWOD Electrical Representative: \_\_\_\_\_  
(Print Name) (Date)

WWOD Instrumentation Representative: \_\_\_\_\_  
(Print Name) (Date)

Contractor Representative(s): \_\_\_\_\_  
(Print Name) (Date)

Engineer: \_\_\_\_\_  
(Print Name) (Date)

\_\_\_\_\_  
(Signed) (Date)