



# Municipality Of South Huron

## Municipal Drain Maintenance Request Form

322 Main Street South Exeter, ON N0M 1S6

Distribution List:  
Office Use Only

Bill Dietrich  
Alex Wolfe  
Taylor Hodgins  
Ange Barnes

No. \_\_\_\_\_ -2026

Contact Name:	_____	Drain Name:	_____
Request Date:	_____	Branch:	_____
		By-Law No.:	_____
Property Owner:	_____	Roll Number:	_____
Phone No.:	_____	911 No.:	_____
Cell No.:	_____	Concession / Lot:	_____ / _____

Nature of Work: (Description of work requested)

TILE REPAIR ☐ DITCH MAINTENANCE ☐ CATCH BASIN REPAIR ☐ OBSTRUCTION REMOVAL ☐

Site Visit Date: \_\_\_\_\_ Location Marked: YES ☐ NO ☐

Field Notes:

Notify owner before commencement of work: YES ☐ NO ☐

Property Owner Signature: \_\_\_\_\_

I request that if necessary, an Engineer be appointed and the he/she appoint a time and place at which he/she will attend and on-site meeting and examine the drainage area with all assessed ratepayers to be invited. I also understand the Drainage Superintendent may undertake maintenance repairs according to the specifications in the last Engineer's report on this drain where possible. In signing this form, the owner is advised that he/she may be charged for work performed by the appointed Engineer should the works not proceed as requested.

Contractor:	_____	Hire Date:	_____
Copy of Work Order:	YES <input type="checkbox"/> NO <input type="checkbox"/>	Sketch Included:	YES <input type="checkbox"/> NO <input type="checkbox"/>

Other Hired Equipment (i.e. list of equipment, materials, labour – please attach all invoices for this project):

Drainage Superintendent Signature: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Please forward all Drain Maintenance Requests to [Transportation@southhuron.ca](mailto:Transportation@southhuron.ca)



## Drainage Work Order Form (Office use only)

### Order Information

Date

Drain Name

Inspection

Hours

Date

Follow Up

Hours

Date

Drainage Inspector Required

Yes

No

Materials Required

Employee Initials

Date

Notes