

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date 11-16-09 Time 12 Pm Location 120 Butler Ln.

Please Circle Appropriate Action New Line Installation / Line Repair Service Line

NEW LINE INSTALLATION:

Were State approved or AWWA Standards Followed (YES / NO)
Detailed summary of disinfection procedure used (Use back of page if needed)

COPY

Chlorine Residual Prior to Initial Flush

Date Time of Initial Flush Length of Time of Initial
Flush Chlorine Residual after Flush

Water Supply (WS) Project Number

FOR LINE REPAIRS:

Interruption of Water Service YES NO Number of Customers Affected

Main Size Repaired Under Pressure YES NO

For partially or fully de-watered mains

Was positive pressure maintained while a trench was opened and area cleaned? (YES / NO)

Time Water Main Valved Off (positive pressure removed) am pm

Nature of Leak or Break

Were State approved or AWWA Standards Followed (YES / NO)

Detailed summary of repair procedure used (Use back of page if needed)

Was water main contaminated during the repair process? (YES / NO)

Disinfection Procedure / Calculations (Use back of page if needed)

Amount of Time Line Flushed Minutes Ending Chlorine
Residual mg/L

Bacteriological Sample Collected: YES NO Results**

**Attach copy of results to record)

Date Time Water Main Returned to Service am pm

Additional Comments

