

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 12-28-11 Time: 3:00<sup>pm</sup> Location: 200 Lake St

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):

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: 15

Main Size: 2" PUC 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) (YES)

Time Water Main Valved Off (positive pressure removed): 1:50 am / pm

Nature of Leak or Break: 2" PUC split 20ft Bell to Bell

Were State approved or AWWA Standards Followed: (YES) / NO Replaced split  
Detailed summary of repair procedure used (Use back of page if needed): Section with  
new piece, 18" under pipe

Was water main contaminated during the repair process? (YES / NO) Bleached / Swabbed  
Disinfection Procedure / Calculations (Use back of page if needed): new section  
Flushed line

Amount of Time Line Flushed: 60 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: 12-28

4:25 am / pm

Additional Comments: See Photos

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