

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 9-24-10 Time: 10:00 A.M. Location: 229 Powers Rd

Please Circle Appropriate Action: NEW LINE INSTALLATION / LINE REPAIR

NEW LINE INSTALLATION:

Service line

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

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

Date: 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 0

Main Size 2" PUL 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

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

Location of Leak or Break: replaced service

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

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

Replace with copper

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

Amount of Time Line Flushed: 1 Minutes Ending Chlorine 2.20  
Residual mg/L

Bacteriological Sample Collected: YES NO Results\*\*  
\*\*Attach copy of results to record)

Date: Time Water Main Returned to Service: 20 am pm

Additional Comments

