

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 5-18-11 Time: 2:00 p.m. Location: 402 Byrd Ave

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

COPY

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: 1

Main Size: 6" cast 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): _____ am / pm

Nature of Leak or Break:

Replaced leaking leaded goose-neck & 1/2" Galv service with 3/4 copper

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

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

Replaced with new copper service

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

Amount of Time Line Flushed: 1 Minutes
Residual: _____ mg/L

Ending Chlorine 2.20

Bacteriological Sample Collected: YES ☐ NO ☐
(**Attach copy of results to record)

Results**: _____

Date / Time Water Main Returned to Service: _____ am / pm

Additional Comments: See Photos 124 psi / 3.5 GPM Before

124 psi / 18 GPM After

Adm-Bull-Billy

Yucca