

Taylor, Bull, Fitzhugh, Harman

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 1-13-10 Time: 3 PM Location: 484 Old Valley Rd

COPY

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

NEW LINE INSTALLATION:

1-19-10  
J

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: \_\_\_\_\_

Main Size: 1" plastic 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)

<sup>1</sup>Time Water Main Valved Off (positive pressure removed): \_\_\_\_\_ am / pm

Nature of Leak or Break: \_\_\_\_\_  
pin hole in pipe

Were State approved or AWWA Standards Followed: (YES / NO)   
Detailed summary of repair procedure used (Use back of page if needed):  
put bleach on band & cleaned pipe & installed band on pipe

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: \_\_\_\_\_

18" x 2' 1 min 45 sec to fill 6"