

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date 11-16-09 Time 5pm Location 727 Trenton 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

COPY

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