

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date 9-1-10

Time 1:30pm

Location 742 Birch Rd

Please Choose 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)

COPY

Chlorine Residual Prior to Initial Flush

Date Time of Initial Flush

Length of Time of Initial

Flush

Chlorine Residual after Flush

Water Supply WSP Project Number

FOR LINE REPAIRS

Interruption of Water Service YES NO Number of Customers Affected

Main Size

Repaired Under Pressure YES NO

Has 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

Leaking Service Line

Were State approved or AWWA Standards Followed (YES NO)

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

Replaced 3/4 leaking Blue Max with copper

Was water main contaminated during the repair process? (YES NO)

Disinfection Procedure Calculations (Use back of page if needed) Flushed line

Amount of Time Line Flushed

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

am pm

Additional Comments

YAC 2