

# FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 12-2-10 Time: 10:00 a.m. Location: Jasper Dr.

Please Circle Appropriate Action: NEW LINE INSTALLATION / LINE REPAIR

## NEW LINE INSTALLATION:

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:

Description of Water Service YES NO Number of Customers Affected

1" copper Repaired Under Pressure YES NO

partially or fully de-watered mains

Was positive pressure maintained while a trench was opened and area cleaned? YES

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

Location of Leak or Break

pin hole in copper

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

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

Repaired with band

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

Disinfection Procedure: Calculations (Use back of page if needed): Bleached Band

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: 20 am pm

Additional Comments

See Photos

Adam - Tim Bull

5 GPM leak

