

# FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 12-20-11 Time: 4:00 Location: Old Uly Rd

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

## NEW LINE INSTALLATION:

COPY

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: 16

Main Size: 2" PUC 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

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

Nature of Leak or Break:

replaced section of 2" PUC

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

Detailed summary of repair procedure used (Use back of page if needed): Replaced with Knock-ons

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

Disinfection Procedure / Calculations (Use back of page if needed): and knock-ons

Amount of Time Line Flushed: \_\_\_\_\_ Minutes

Residual: \_\_\_\_\_ mg/L

Ending Chlorine

Bacteriological Sample Collected: YES ☐ NO ☐

(\*\*Attach copy of results to record)

Results\*\*: \_\_\_\_\_

Date / Time Water Main Returned to Service: \_\_\_\_\_ am / pm

Additional Comments:

Had water flowing from feed side

Rev 01-21-09

See Photos

Adam-Billy-Donnie

Good leak initially broke at bell

COPY