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FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 7-31-14 Time: 11:00 Location: Rankin Chapel Rd

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

NEW LINE INSTALLATION:

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

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

7/31/14

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: 15

Main Size: 4" PVC 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

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

Nature of Leak or Break: Replace 20' section of pipe

Were State approved or AWWA Standards Followed: YES / NO Replaced with

Detailed summary of repair procedure used (Use back of page if needed): PVC + Knock-on

Was water main contaminated during the repair process? (YES / NO) NO Bleach pipe and knock-on

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

Amount of Time Line Flushed: 1 1/2 hrs. 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:

* Had positive pressure on Both ends. Split 18' Replace 20ft

Adam
Donnie
Tina

See Photos

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