

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 12-29-11 Time: 11:00 Location: South Walden Dr.

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):

COPY

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: 0

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)

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

Nature of Leak or Break: Split in 2" PUC at Dresser

Were State approved or AWWA Standards Followed: (YES / NO) (YES) Replaced 20"
Detailed summary of repair procedure used (Use back of page if needed): Section 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
Flushed line at B.O.

Amount of Time Line Flushed: 15 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: See Photos

Rev 01-21-09

Throttled valve down, had positive pressure at all times. Two-way feed. Dropped in new section
Adam-Bull-Tim Bad Leak

10/10/10