

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 1-28-11 Time: 4:30 p.m. Location: Seiber Rd

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)

COPY

1-31-11

Date 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" 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:

Customer hit 2" PVC while digging for leak on his side

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
Residual _____ mg/L

Ending Chlorine

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

