

Taylor, Fitzhugh letter

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 3-30-10 Time: 9:45 Am Location: Sexton Loop

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

NEW LINE INSTALLATION:

COPY  
45-10  
8

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: \_\_\_\_\_

Main Size: 4" 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)

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

Nature of Leak or Break: Coupling leaking

Were State approved or AWWA Standards Followed: (YES / NO)  
Detailed summary of repair procedure used (Use back of page if needed):

dug 16" below main & cut coupling off & put full circle repair clamp on main.

Was water main contaminated during the repair process? (YES / NO)  
Disinfection Procedure / Calculations (Use back of page if needed):

Cleaned pipe & band with bleach & put band on pipe.

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: \_\_\_\_\_ am / pm

Additional Comments:

COPY