

Taylor, Harmon, Melton

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

COPY

Date: 3-18-10 Time: 10 Am Location: Stearns Norman

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):

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: 5

Main Size: 2" 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)

<sup>1</sup>Time Water Main Valved Off (positive pressure removed): 10:00 am / pm

Nature of Leak or Break:

Replace blow off at end of line

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

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

Dug down 16" below pipe & cleaned pipe & material w/ bleach

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

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

We bleached parts & pipe & put main back in service & ran blowoff

Amount of Time Line Flushed: 45 Minutes

Ending Chlorine 220

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:

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