

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 1-17-11 Time: 4pm Location: Virginia & Sewanee
 Please Circle Appropriate Action: NEW LINE INSTALLATION / LINE REPAIR **COPY**

NEW LINE INSTALLATION:

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

Taylor, Fitch, Harmon, Santher

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

Main Size: 4" Cast. 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:

Crack in Pipe

Were State approved or AWWA Standards Followed: YES / NO

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

Cleaned area & dug 16" below pipe & around pipe

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

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

Cleaned parts & material with Bleach.

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: _____ 20 _____ am pm

Additional Comments:

Y 900