

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 1-13-10 Time: 10:30 Location: Westbury Hpts

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

COPY

NEW LINE INSTALLATION:

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

1-19-10 J

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: 4

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)

¹Time Water Main Valved Off (positive pressure removed): 10:30 am pm

Nature of Leak or Break:

bell was bad

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

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

put bleach on coupling & pipe & cleaned pipe & put in service

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

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

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:

18" x 3' 40sec to fill 6"

