

FIELD DATA FOR NEW LINE INSTALLATION OR LINE REPAIR

Date: 2/18/14 Time: 1:38 Location: Pawy Hill

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

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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: 100

Main Size: 6" CI 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): 4:00 am / pm

Nature of Leak or Break:
6" C.I Snapped

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

Cut out 32" piece replaced with DI 2 15" Full Circle

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

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

Sand
Bleached

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:

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