

PROPOSED FACILITIES:

- 1 PROPOSED 2" PE MAIN
- 6 INSTALL 4" X 4" X 2" PE TEE #140-5311
- 8 PROPOSED 4" PE MAIN

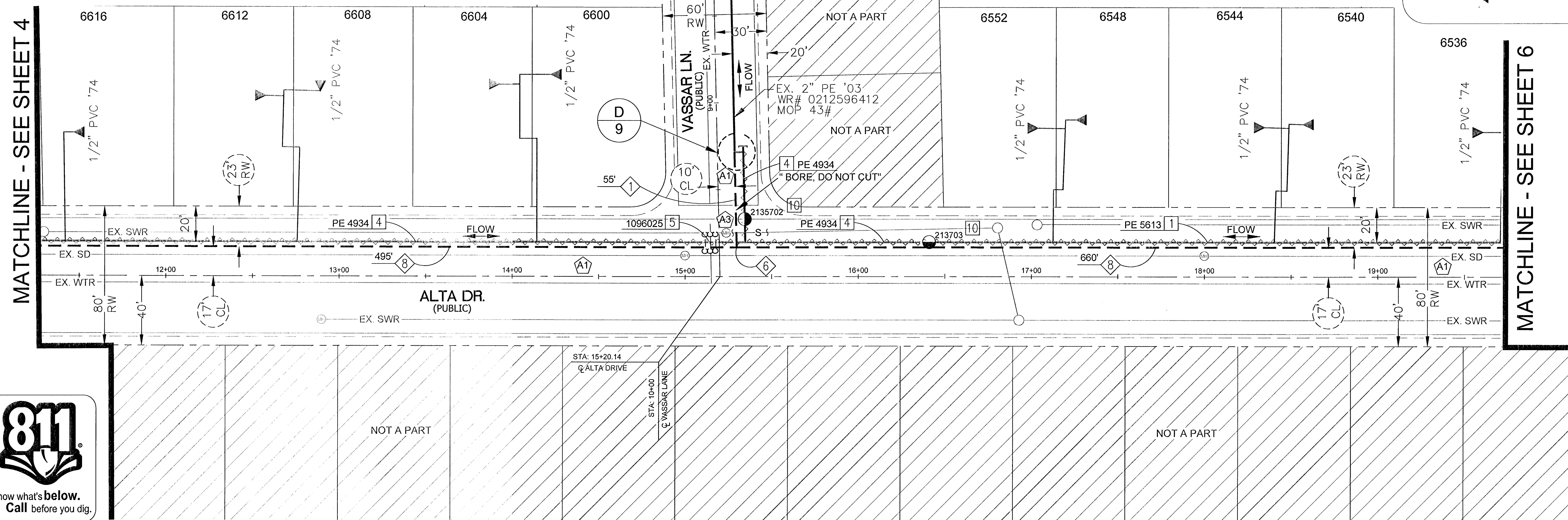
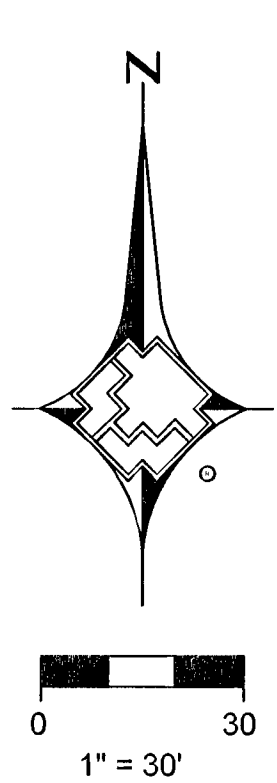
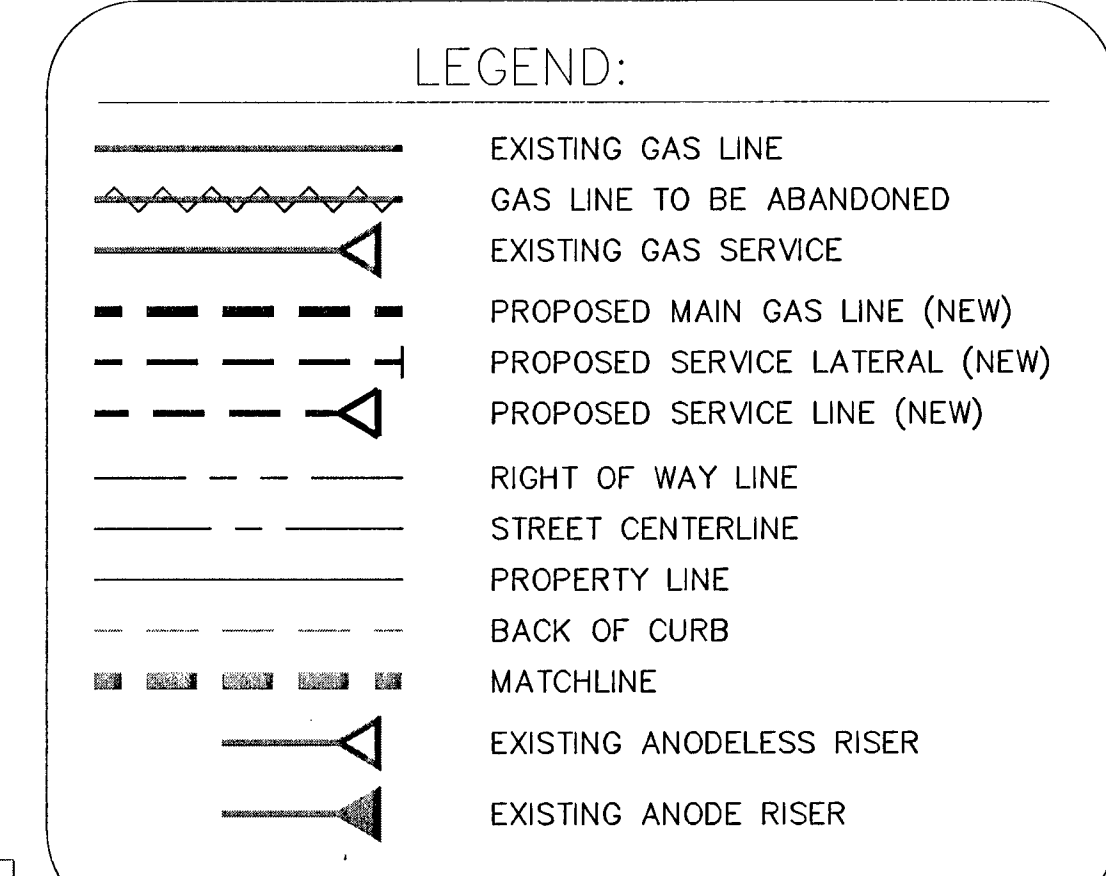
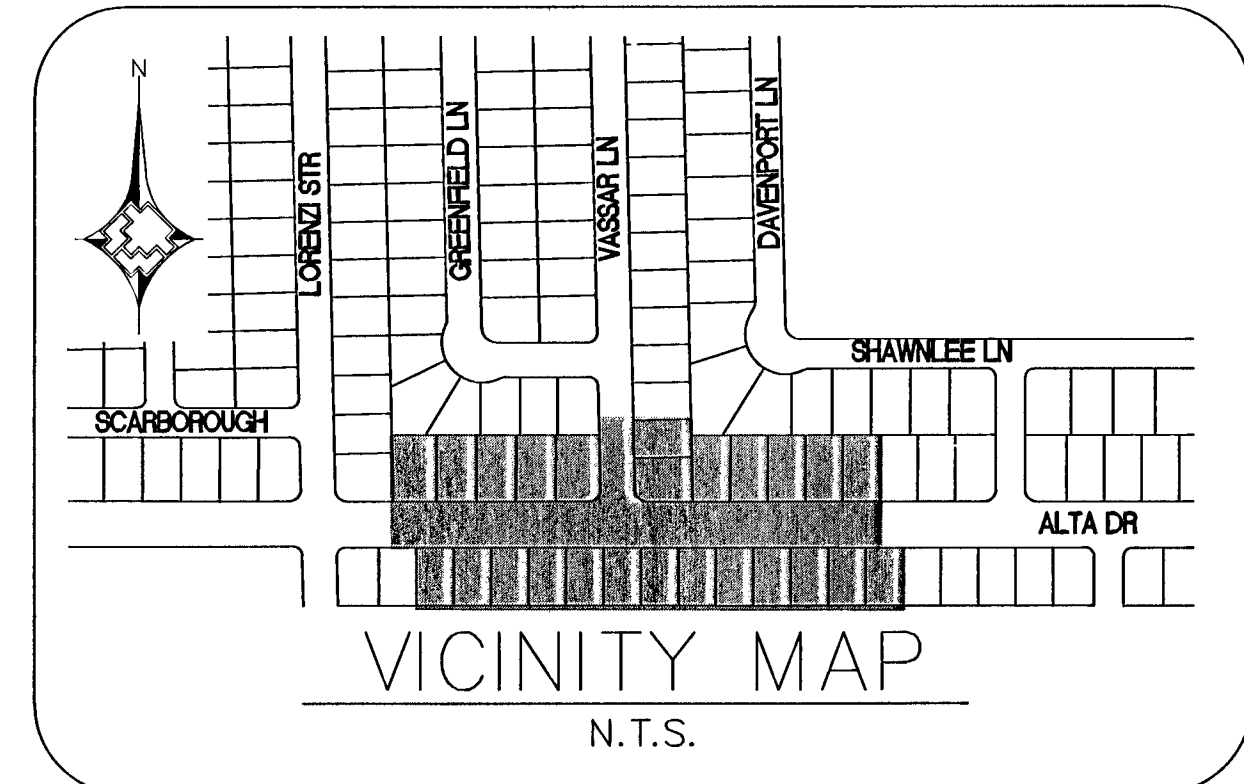
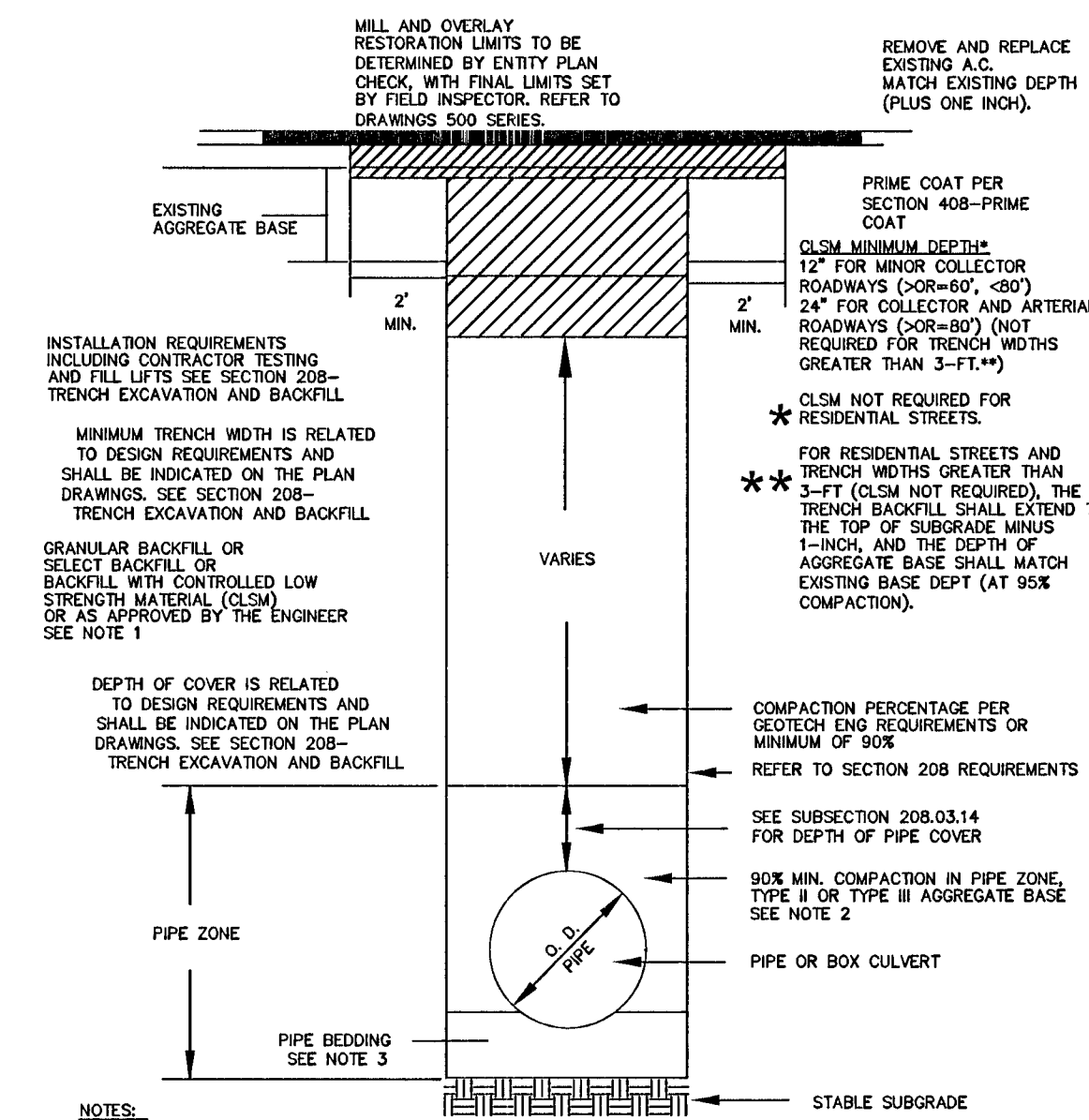
ABANDONED FACILITIES:

- 1 ABANDON 2" PVC '74 MOP 43#
- 4 ABANDON 2" PVC '73 MOP 43#
- 5 ABANDON 2" PE '09 MOP 43#
- 10 ABANDON EX. 2" NON-ESSENTIAL VALVE

RTC NOTES:

TRENCHING & BACKFILL TO CONFORM WITH UNIFORM STANDARD SPECS. SECTION 208, AND RTC STANDARD(S) 503

- A1 RTC 500.3
- A2 RTC 500.4
- A3 RTC 500.5



1. _____ 2. _____ 3. _____ 4. _____ NO. DESCRIPTION BY DATE APPVD		AS-BUILT DRAWING-PRESSURE TEST DATA TEST MEDIUM TEST METHOD <input type="checkbox"/> AIR <input type="checkbox"/> GAUGE <input type="checkbox"/> NITROGEN <input type="checkbox"/> CHART <input type="checkbox"/> WATER <input type="checkbox"/> GAUGE/ <input type="checkbox"/> SOAP PRESS REC SN# TEST PRES. (PSIG) _____ TIME _____ DATE _____ PERFORMED BY _____		VISUAL INSPECTION CERTIFICATION I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT HAVE PERFORMED NAME _____ DATE _____ INSPECTOR FOREMAN _____ REVIEWED BY _____ PERMIT INFORMATION CLV TAX CODE 02-0200		CONSTRUCTION ISOLATION AREA 46 W.R. NO. 1531932 ENGINEER/TECH: HECTOR INIGUEZ ACCOUNT REP: _____ PROJECT CONTACT: _____ SHEET NO: 5 OF 10 SCALE: 1" = 30' DATE: 8/21/13 DWN. BY: MFS CHKD. BY: BMH APPVD. BY: PD		PHONE: (702)365-2204 PHONE: _____ PHONE: _____ TITLE SI-CLV-LORENZI & ALTA PVC REPLACEMENT	
REVISIONS TAX CODES UNIT NO. UNIT TYPE INSTL. RETIRED INSTL. RETIRED PROPOSED COMPLETED PROPERTY UNITS		SEE SHEET 2		SEE SHEET 2		SEE SHEET 2			