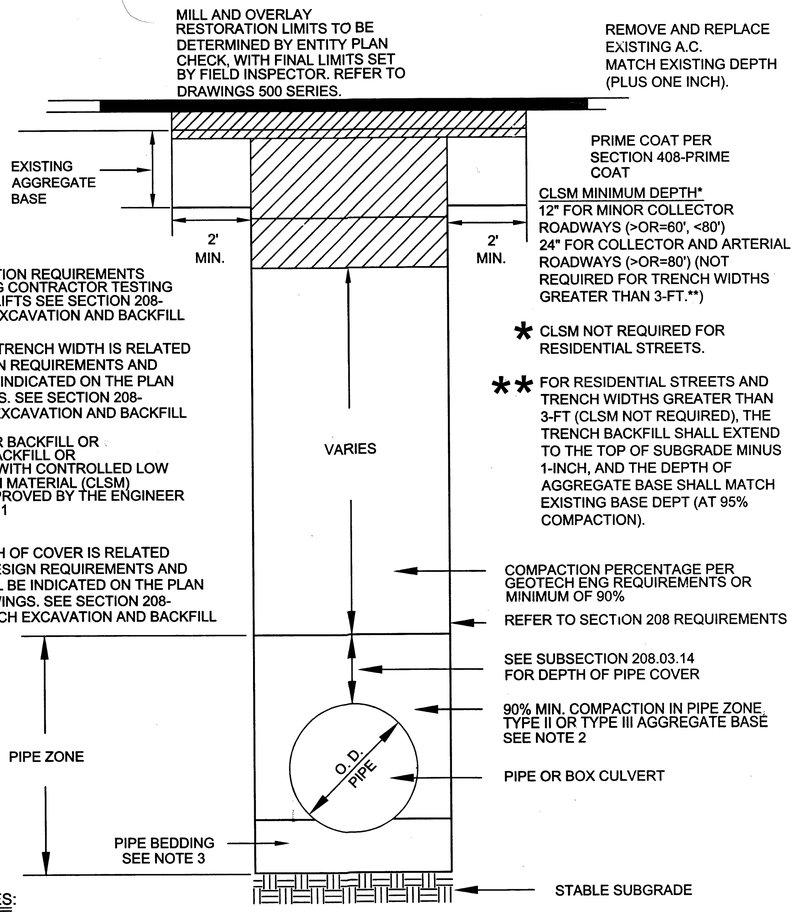


CLSM MINIMUM DEPTH*
12" FOR MINOR COLLECTOR ROADWAYS (>OR=60', <80')
24" FOR COLLECTOR AND ARTERIAL ROADWAYS (>OR=80') (NOT REQUIRED FOR TRENCH WIDTHS GREATER THAN 3-FT.**)

* CLSM NOT REQUIRED FOR RESIDENTIAL STREETS.

** FOR RESIDENTIAL STREETS AND TRENCH WIDTHS GREATER THAN 3-FT (CLSM NOT REQUIRED), THE TRENCH BACKFILL SHALL EXTEND TO THE TOP OF SUBGRADE MINUS 1-INCH, AND THE DEPTH OF AGGREGATE BASE SHALL MATCH EXISTING BASE DEPT (AT 95% COMPACTION).

NOTES:

1. NO STONES OR LUMPS GREATER THAN 3" PERMITTED IN TRENCH 2' OR LESS IN WIDTH.
2. TRENCH WIDTH, BEDDING, SUBGRADE AND PIPE ZONE REQUIREMENTS FOR UTILITY INSTALLATIONS SHALL CONFORM TO THE RESPECTIVE ENTITY REQUIREMENTS.
3. CRUSHED ROCK MAY BE USED FOR PIPE BEDDING ONLY IF MATERIAL USE HAS BEEN SPECIFICALLY APPROVED BY THE GOVERNING AGENCY. SEE STANDARD DRAWING NO. 505 FOR PIPE BEDDING METHODS.
4. LAS VEGAS VALLEY WATER DISTRICT REQUIRES PIPE BEDDING AND BACKFILL WITHIN THE PIPE ZONE TO BE OF THE SAME MATERIAL.

RTC STD DWG 503

Know what's **below.** **Call** before you dig.

ABBREVIATIONS

AB	ABANDONED
AC	ASPHALTIC CONCRETE
ACP	ASBESTOS CEMENT PIPE
AIM	AREA ISOLATION MODULE
BLVD	BOULEVARD
BM	BENCHMARK
BMI	BLACK MOUNTAIN INDUSTRIAL
BO	BLOW OFF
BTU	BRITISH THERMAL UNIT
BWC	BASIC WATER COMPANY
COBC	CITY OF BOULDER CITY
CC	CLARK COUNTY
CCAUSD	CLARK COUNTY AREA UNIFORM STANDARD DRAWING
CCRFCD	CLARK COUNTY REGIONAL FLOOD CONTROL DISTRICT
CCWRD	CLARK COUNTY WATER RECLAMATION DISTRICT
CIP	CAST IRON PIPE
CL	CENTERLINE
CLV	CITY OF LAS VEGAS
CNLV	CITY OF NORTH LAS VEGAS
COH	CITY OF HENDERSON
DET	DETAIL
DI	DUCTILE IRON
DIA	DIAMETER
DIMP	DISTRIBUTION INTEGRITY MANAGEMENT PROGRAM
DNR	DOES NOT REGISTER
DWG	DRAWING
EG	EXISTING GROUND
EHDD	EFFECTIVE HEATING DEGREE DAY
ELEC	ELECTRICAL
ELEV	ELEVATION
EMRS	ELECTRONIC MAPPING RECORDS SYSTEM
EPR	ELECTRONIC PRESSURE RECORDERS
ESMT	EASEMENT
EX	EXISTING
FERC	FEDERAL ENERGY REGULATORY COMMISSION
FOS	FACILITY OUT OF SERVICE
FH	FIRE HYDRANT
GIR	GAS INFRASTRUCTRE REPLACEMENT
GPR	GAS PRESSURE REGULATOR
HCA	HIGH CONSEQUENCE AREA
HDD	HEATING DEGREE DAY
HDPE	HIGH DENSITY POLYETHYLENE PIPE
HP	HIGH PRESSURE
HERS	HOME ENERGY RATING SYSTEM
HOP	HISTORIC OPERATING PROCEDURE
HVTT	HIGH VOLUME TAPPING TEE
ID	INSIDE DIAMETER
IN	INCH(ES)
IPS	IRON PIPE SIZE
IS	IDENTIFIED SITE
JT	JOINT TRENCH
KRG	KERN RIVER GAS COMPANY
LDCPE	LARGE DIAMETER COILED POLYETHYLENE PIPE
LVVWD	LAS VEGAS VALLEY WATER DISTRICT
MAOP	MAXIMUM ALLOWABLE OPERATING PRESSURE
MCFH	THOUSAND CUBIC FEET PER HOUR
MH	MANHOLE
MOP	MAXIMUM OPERATING PRESSURE
MSA	METER SET ASSEMBLY
MVP	MAPPING VERIFICATION PROCEDURE
NAP	NOT A PART
NDOT	NEVADA DEPARTMENT OF TRANSPORTATION
NTSB	NATIONAL TRANSPORTATION SAFETY BOARD
NTS	NOT TO SCALE
OC	ON CENTER
OD	OUTSIDE DIAMETER
OH	OVERHEAD
OHP	OVERHEAD POWER
P	POWER
PAOP	POTENTIAL ALLOWABLE OPERATING PRESSURE
PCC	PORTLAND CEMENT CONCRETE
PE	POLYETHYLENE PIPE
PH	POT HOLE
PHMSA	PIPELINE & HAZARDOUS MATERIALS SAFETY ADMINISTRATION
PL	PROPERTY LINE
PIC	POTENTIAL IMPACT CIRCLE
PLS	PRESSURE LIMITING STATION
PP	POWER POLE
PQF	PREQUALIFIED FITTING
PVC	POLYVINYL CHLORIDE
RAM	RISK ASSESSMENT MODEL
RC	REINFORCED CONCRETE
RCP	REINFORCED CONCRETE PIPE
SD	STORM DRAIN
SDMH	STORM DRAIN MANHOLE
SDR	STANDARD DIMENSION RATIO
SF	SQUARE FOOT
SHT	SHEET
SHP	STEEL HIGH PRESSURE PIPE
SMYS	SPECIFIED MAXIMUM YIELD STRENGTH
SNWA	SOUTHERN NEVADA WATER AUTHORITY
SS	SANITARY SEWER
SST	STAINLESS STEEL
ST	STREET
STA	STATION
STD	STRENGTH TEST DRAWING
STL	STEEL
SWG	SOUTHWEST GAS
TEL	TELEPHONE
TB	THRUST BLOCK
TOP	TOP OF PIPE
TP	TEST POINT
TRIMP	TRANSMISSION INTEGRITY MANAGEMENT PROGRAM
UDACS	UNIFORM DESIGN AND CONSTRUCTION STANDARDS
UOC	UNUSUAL OPERATING CONDITIONS
UOP	UNIT OF PROPERTY
UPRR	UNION PACIFIC RAILROAD
USD	UNIFORM STANDARD DRAWING
VCP	VITRIFIED CLAY PIPE
VERT	VERTICAL
VG	VALLEY GUTTER
VSP	VINTAGE STEEL PIPE
W	WATER
WMS	WORK MANAGEMENT SYSTEM
WR	WORK REQUEST
WT	WALL THICKNESS
WV	WATER VALVE
YD	YARD(S)

CONSTRUCTION NOTES

1. SUGGESTED GAS LOCATIONS ARE TO CLEAR SUBSTRUCTURES LOCATE IN FIELD.
2. ALL PIPELINE CONSTRUCTION SHALL CONFORM TO APPLICABLE JURISDICTION SPECIFICATIONS.
3. DO NOT SCALE THIS DRAWING.
4. SEE AC'S FOR SERVICE REPLACEMENT.
5. CHANGE IN PROPOSED MAIN LOCATION MUST BE AUTHORIZED BY SWG ENGINEER PRIOR TO INSTALLATION.
6. GAS MAINS SHALL BE PURGED PER OPERATIONS MANUAL.
7. ABANDONED SERVICE NO ACTION REQUIRED.
8. REPLACE ALL ACTIVE SERVICES INCLUDING AA, PVC, M7000 PE, M8000 PE, EXCEPT WHERE EXISTING M8100 PE SERVICES ARE VERIFIED, INSPECTED, AND APPROVED FOR TIE-OVER BY SWG INSPECTOR.
9. EXISTING SERVICES, VERIFICATION, AND INSPECTION REQUIRED FROM MAIN TO RISER. TIE INTO NEW MAIN IF APPROVED BY SWG INSPECTOR. REPLACE ALL AA, PVC, M7000 PE, AND M8000 PE SERVICES. M8100 PE SERVICES TO BE VERIFIED, INSPECTED AND APPROVED BY SWG INSPECTOR.
10. EXISTING SERVICE, UNKNOWN TYPE, SIZE, AND LOCATION TO BE VERIFIED.
11. REPLACEMENT SERVICES TO BE SINGLE OR BRANCHED. NO CROSS-LOT REPLACEMENT SERVICES PERMITTED.
12. REPLACE ALL ANODE RISERS WITH ANODELESS RISERS.
13. ALL EXISTING UTILITY LOCATION TO BE VERIFIED PRIOR TO START OF CONSTRUCTION.
14. CONTACT ENGINEERING FOR BYPASS INFORMATION.
15. ALL MAIN TIE-INS REQUIRING TEES ARE TO BE FULL-FLOW TEES UNLESS OTHERWISE STATED.
16. ALL SHORING REQUIREMENTS SHALL CONFORM TO APPLICABLE PORTIONS OF THE OPERATIONS MANUAL.
17. REQUEST FOR SURVEYING AND/OR STAKING WILL BE SUBMITTED TO ENGINEERING 72 HOURS IN ADVANCE, MINIMUM.
18. THE FOLLOWING VALVE(S) ARE TO BE ABANDONED ON THIS WORK REQUEST:
19. TRENCHING AND PAVEMENT REPLACEMENT SHALL CONFORM WITH RTC STANDARD 500.3. & 503. AND UNIFORM STANDARD SPEC SECTION 208.

RTC NOTES:

PAVEMENT REPAIR SHALL CONFORM TO RTC:

A1 500.3

A2 503

NO.	DESCRIPTION	BY	DATE	APPVD.
1.				
2.				
3.				
4.				

REVISIONS

SOUTHWEST GAS CORPORATION

TAX CODES	UNIT NO.	UNIT TYPE	INSTL. (PROPOSED)	RETIRED (PROPOSED)	INSTL. (COMPLETED)	RETIRED (COMPLETED)

PROPERTY UNITS

SEE SHEET 3

AS-BUILT DRAWING-PRESSURE TEST DATA

PIPE DIA. _____ TEST MEDIUM: ☐ AIR ☐ NITROGEN ☐ WATER ☑ SOAP — TEST METHOD: ☐ GAUGE ☐ CHART — GAUGE/PRESS REC SN#

PIPE LENGTH _____

PIPE TYPE _____

MIN. DURATION _____

TEST PRES. (PSIG): (MAX) _____ (MIN) _____

TIME: (START) _____ (STOP) _____

DATE: (START) _____ (STOP) _____

PERFORMED BY: _____

SWG VERIFIED BY: _____

SEE SHEET 3

INDIVIDUAL PERFORMING VISUAL INSPECTION

VISUAL INSPECTION CERTIFICATION

I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT I HAVE PERFORMED

NAME _____ DATE _____

AS-BUILTS ACCEPTED BY _____ DATE _____

POSTED BY _____ DATE _____

POSTING QC'D BY _____ DATE _____

SEE SHEET 3

CONSTRUCTION

INSPECTOR _____

FOREMAN _____

REVIEWED BY _____

SEE SHEET 3

PERMIT INFORMATION

CITY OF LAS VEGAS

TAX CODE 02-0204 & 02-0207

ISOLATION AREA	W.R. NO.
ISO_21_DIST_092	3261890

LOCATION	ATLAS #/TILE #
SEC 21 T20S R61E M.D.M.	x624y524

ENGINEER/TECH: JACOB SAKAGUCHI		PHONE: 702-365-2014
ACCOUNT REP: FADI AZAR		PHONE: 702-528-8251
PROJECT CONTACT: MARTEL CLAYTON		PHONE: 702-327-9261
SHEET NO: 2 OF 4	SCALE: NTS	DATE: 10/03/2016
DWN. BY: SEI	CHKD. BY:	APPVD. BY:

TITLE

MLK MEDICAL CONSTRUCTION NOTES

H# 66665 107V6760

DOC_3261890

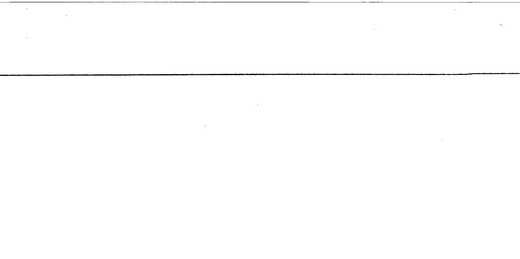
MATERIAL LIST FOR PROPOSED DISTRIBUTION FACILITIES

ITEM#	QTY. (DESIGN)	QTY. (AS-BUILT)	STOCK ID#	DESCRIPTION
1	346'		100-5101	PROPOSED 2" PE MAIN
2	1		160-8171	PROPOSED 2"x2" PE TAPPING TEE
3	2		140-3067	PROPOSED 2" PE 90 DEGREE ELBOW
4	1		140-3074	PROPOSED 2" PE FULL FLOW TEE
5	2		140-3060	PROPOSED 2" PE CAP
6	60'		101-8526	PROPOSED 1" PE SERVICE

VISUAL INSPECTION (OQ/PJQ)

SIGNATURE _____

DATE _____



TYPICAL UTILITY CROSSING DETAIL
NOT TO SCALE

SYSTEM D_VALLEY_WIDE

DR. NO. 21DR10002365

SEGMENT M.A.O.P. N/A

SYSTEM M.A.O.P. 43 PSIG

SYSTEM M.O.P. 43 PSIG

PURGE PLAN WAS COMPLETED IN ACCORDANCE WITH THE OPERATIONS MANUAL GUIDELINES BY:

PRINT:_____ DATE:_____

SIGNATURE:_____

811 Know what's **below.** **Call** before you dig.

NO.	DESCRIPTION	BY	DATE	APPVD.
1.				
2.				
3.				
4.				

REVISIONS

SOUTHWEST GAS CORPORATION

TAX CODES	UNIT NO.	UNIT TYPE	INSTL. (PROPOSED)	RETIRED (PROPOSED)	INSTL. (COMPLETED)	RETIRED (COMPLETED)
02-0204						
	3760102	2" PE	327'			
	3800101	1" PE	60'			
02-0207						
	3760102	2" PE	19'			

PROPERTY UNITS

AS-BUILT DRAWING-PRESSURE TEST DATA

PIPE DIA. _____ TEST MEDIUM ☐ AIR ☐ NITROGEN ☐ WATER ☐ SOAP TEST METHOD ☐ GAUGE ☐ CHART GAUGE/PRESS REC SN#

PIPE LENGTH _____

PIPE TYPE _____

MIN. DURATION _____

TEST PRES. (PSIG): (MAX)_____ (MIN)_____

TIME: (START)_____ (STOP)_____

DATE: (START)_____ (STOP)_____

PERFORMED BY: _____

SWG VERIFIED BY: _____

INDIVIDUAL PERFORMING VISUAL INSPECTION
VISUAL INSPECTION CERTIFICATION
I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT I HAVE PERFORMED

NAME _____ DATE _____

AS-BUILTS ACCEPTED BY _____ DATE _____

POSTED BY _____ DATE _____

POSTING QC'D BY _____ DATE _____

CONSTRUCTION

INSPECTOR _____

FOREMAN _____

REVIEWED BY _____

PERMIT INFORMATION

CITY OF LAS VEGAS
TAX CODE 02-0204 & 02-0207

ISOLATION AREA	W.R. NO.
ISO_21_DIST_092	3261890
LOCATION	**ATLAS #/TILE #**
SEC 21 T20S R61E M.D.M.	x624y524

ENGINEER/TECH: JACOB SAKAGUCHI		PHONE: 702-365-2014
ACCOUNT REP: FADI AZAR		PHONE: 702-528-8251
PROJECT CONTACT: MARTEL CLAYTON		PHONE: 702-327-9261
SHEET NO: 3 OF 4	SCALE: NTS	DATE: 10/03/2016
DWN. BY: SEI	CHKD. BY:	APPVD. BY:

TITLE H# 66665 107V6760

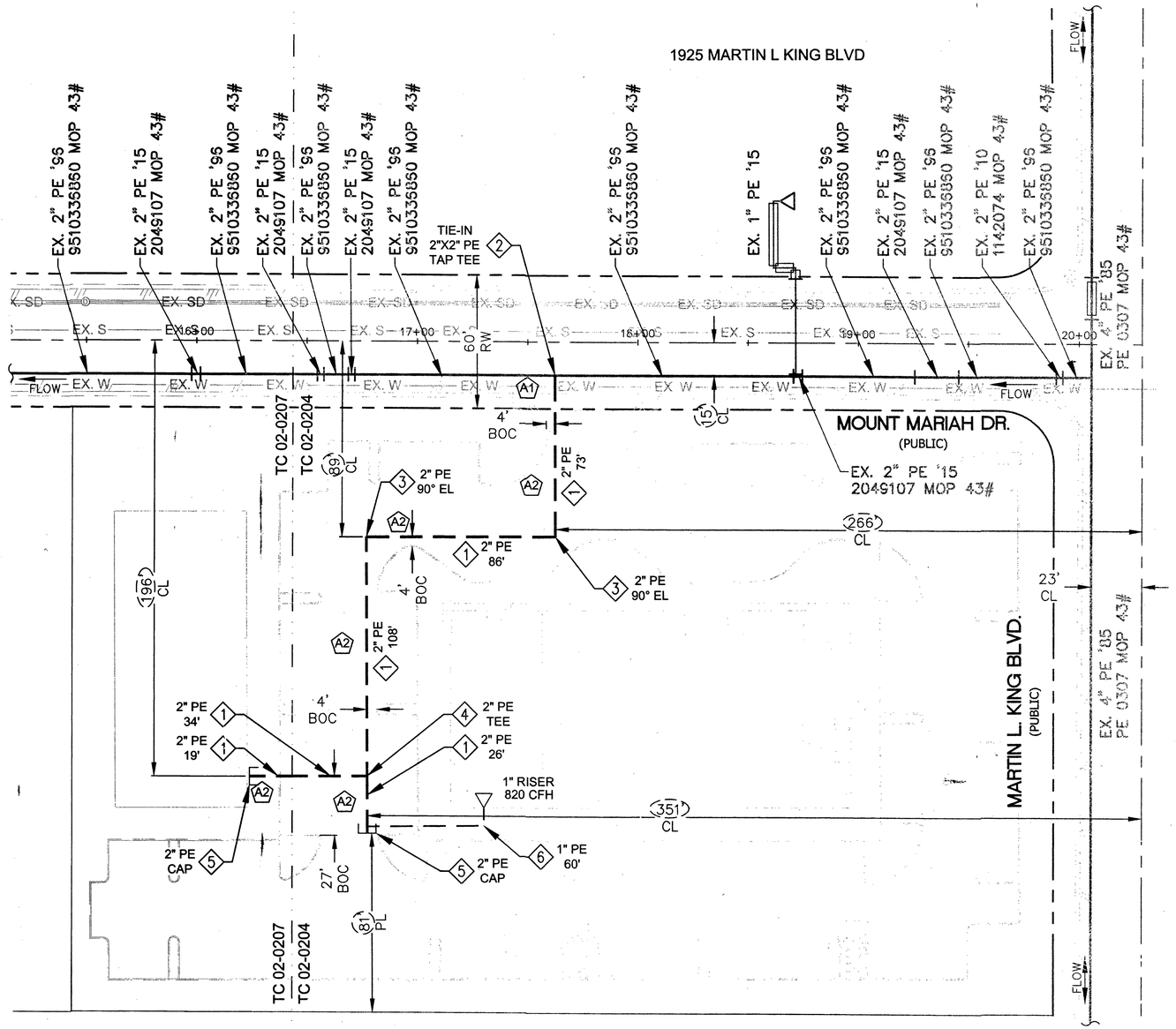
MLK MEDICAL
MATERIALS & NOTES

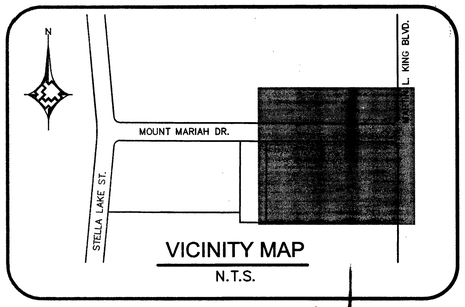
DOC_3261890

N

0 30

1" = 30'





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RTC NOTES:

PAVEMENT REPAIR SHALL CONFORM TO RTC:

A1 500.3

A2 503

811 Know what's **below.** **Call** before you dig.

NO.	DESCRIPTION	BY	DATE	APPVD.
1.				
2.				
3.				
4.				

REVISIONS

SOUTHWEST GAS CORPORATION

TAX CODES	UNIT NO.	UNIT TYPE	INSTL. PROPOSED	RETIRED PROPOSED	INSTL. COMPLETED	RETIRED COMPLETED

PROPERTY UNITS

AS-BUILT DRAWING-PRESSURE TEST DATA

PIPE DIA. _____ TEST MEDIUM ☐ AIR ☐ NITROGEN ☐ WATER ☐ SOAP TEST METHOD ☐ GAUGE ☐ CHART GAUGE/ PRESS REC SN#

PIPE LENGTH _____

PIPE TYPE _____

MIN. DURATION _____

TEST PRES. (PSIG): (MAX) _____ (MIN) _____

TIME: (START) _____ (STOP) _____

DATE: (START) _____ (STOP) _____

PERFORMED BY: _____

RTG VERIFIED BY: _____

SEE SHEET 3

INDIVIDUAL PERFORMING VISUAL INSPECTION

VISUAL INSPECTION CERTIFICATION

I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT I HAVE PERFORMED

NAME _____ DATE _____

SEE SHEET 3

AS-BUILTS ACCEPTED BY _____ DATE _____

POSTED BY _____ DATE _____

POSTING QC'D BY _____ DATE _____

CONSTRUCTION

INSPECTOR _____

FOREMAN _____

REVIEWED BY _____

SEE SHEET 3

PERMIT INFORMATION

CITY OF LAS VEGAS

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ISOLATION AREA	W.R. NO.
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ACCOUNT REP: FADI AZAR		PHONE: 702-528-8251
PROJECT CONTACT: MARTEL CLAYTON		PHONE: 702-327-9261
SHEET NO: 4 OF 4	SCALE: 1"=30'	DATE: 10/03/2016
DWN. BY: SEI	CHKD. BY:	APPVD. BY:

TITLE

MLK MEDICAL DESIGN PLAN

H#66665 107V6760

DOC_3261890