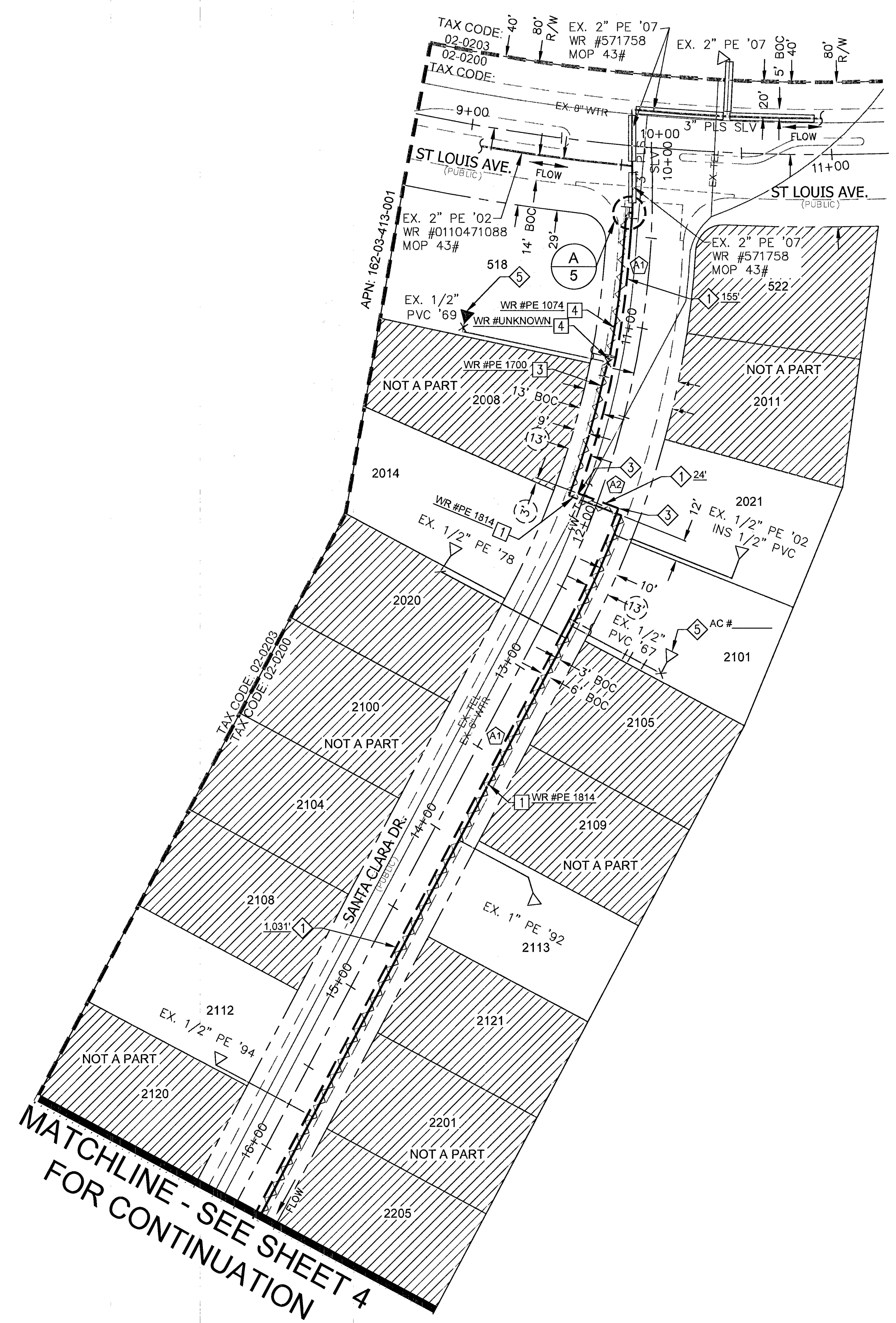


- NOTES:**
- NO STONES OR LUMPS GREATER THAN 3" PERMITTED IN TRENCH 2' OR LESS IN WIDTH.
  - TRENCH WIDTH, BEDDING, SUBGRADE AND PIPE ZONE REQUIREMENTS FOR UTILITY INSTALLATIONS SHALL CONFORM TO THE RESPECTIVE ENTRY REQUIREMENTS.
  - CRUSHED ROCK MAY BE USED FOR PIPE BEDDING ONLY IF MATERIAL USE HAS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

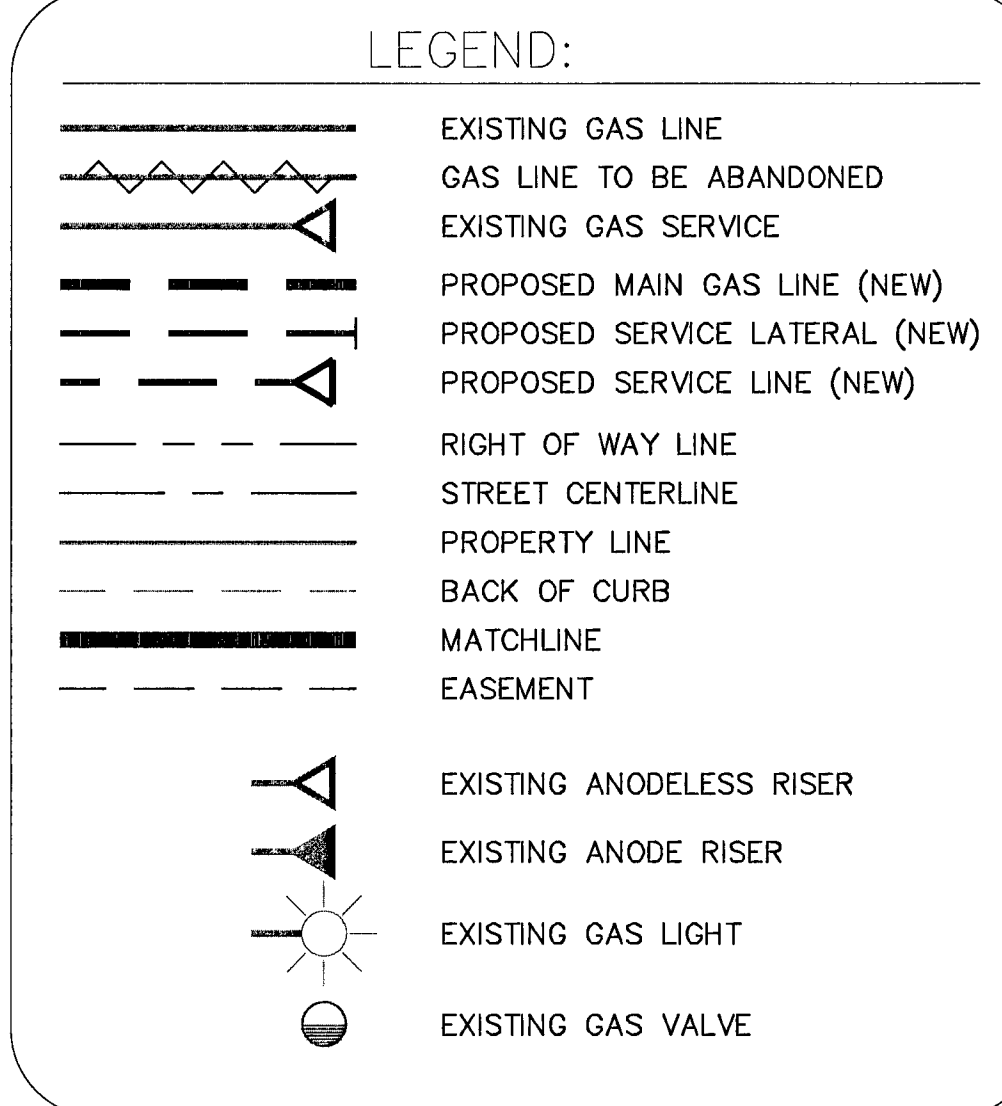


**PROPOSED FACILITIES:**

- ① PROP. 2" PE MAIN (100-5101)
- ③ PROP. 2" PE 90° ELBOW (140-3067)
- ⑤ EXISTING RISER TO BE REPLACED. SEE INDIVIDUAL AC

**ABANDONED FACILITIES:**

- ① ABANDON 2" PVC '67 MOP 43#
- ③ ABANDON 2" PVC '66 MOP 43#
- ④ ABANDON 2" PVC '64 MOP 43#



**RTC NOTES:**

- PAVEMENT REPAIR SHALL CONFORM TO RTC STANDARD(S):
- A1 500.4
  - A2 500.5

RTC STD DWG 503



MATCHLINE - SEE SHEET 4 FOR CONTINUATION

1. _____ 2. _____ 3. _____ 4. _____				AS-BUILT DRAWING-PRESSURE TEST DATA PIPE DIA. _____ 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# MIN. DURATION _____ START _____ END _____ TEST PRES. (PSIG) _____ TIME _____ DATE _____ PERFORMED BY _____				VISUAL INSPECTION CERTIFICATION I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT I HAVE PERFORMED NAME _____ DATE _____ INSPECTOR _____ FOREMAN _____ REVIEWED BY _____				CONSTRUCTION INSPECTOR _____ FOREMAN _____ REVIEWED BY _____		ISOLATION AREA ISO_21_DIST_096		W.R. NO. 1994608		ENGINEER/TECH: MARIA RUSHING ACCOUNT REP: _____ PROJECT CONTACT: MARIA RUSHING SHEET NO: 3 OF 5 DWN BY: ZONE ENG		PHONE: 702-365-2008 PHONE: 702-365-2008 DATE: 2/7/15 APPVD. BY: _____	
REVISIONS NO. DESCRIPTION BY DATE APPVD				PROPERTY UNITS TAX CODES UNIT NO. UNIT TYPE INSTL. RETIRED INSTL. RETIRED PROPOSED COMPLETED				PERMIT INFORMATION CITY OF LAS VEGAS TAX CODE 02-0200		LOCATION T21S R61E SEC 3 M.D.M.		ATLAS #/TILE # x627y508 x627y506 x624y506		TITLE <b>F-CLV 2015 SS-SANTA CLARA &amp; SAHARA</b>							