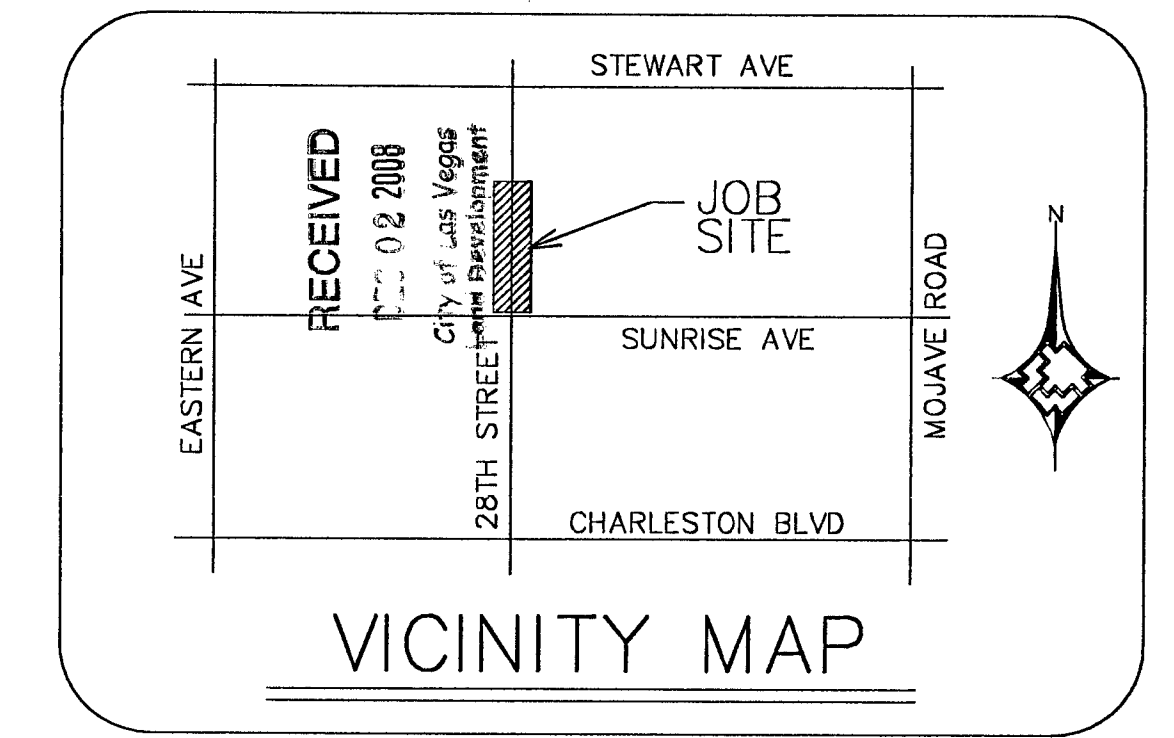


TRENCH DETAIL
FOR IMPROVED AREAS ONLY
CLV



- LEGEND:
- EXISTING GAS LINE
 - PROPOSED MAIN GAS LINE
 - PROPOSED SERVICE GAS LINE
 - BOUNDARY LINE
 - RIGHT OF WAY LINE
 - STREET CENTERLINE
 - BACK OF CURB / LOT LINE
 - EX. BACK OF CURB / LOT LINE
 - S — SEWER LINE
 - W — WATER LINE
 - ● — FIRE HYDRANT
 - SD — STORM DRAIN LINE

- CONSTRUCTION NOTES:
- SUGGESTED GAS LOCATIONS ARE TO CLEAR SUBSTRUCTURES. LOCATE IN FIELD.
 - ALL PIPELINE CONSTRUCTION SHALL CONFORM TO APPLICABLE JURISDICTION SPECIFICATIONS.
 - DO NOT SCALE THIS DRAWING.
 - GAS MAINS SHALL BE PURGED PER THE OPERATIONS MANUAL.
 - ALL MAIN TIE-INS REQUIRING TEES ARE TO BE FULL FLOW TEES, UNLESS OTHERWISE STATED.
 - 28th ST IS PAVED, COMPLY WITH RTC STDS. 500BT & 504. SUNRISE AVE IS PAVED, COMPLY WITH RTC STDS. 500BL2 & 504.
 - CONTACT ENGINEERING FOR BY-PASS INFORMATION.

PURGE NOTE:
PURGE PLAN WAS COMPLETED IN ACCORDANCE WITH THE OPERATIONS MANUAL GUIDELINES BY:
Name _____ Date _____

NOTE:
THERE IS 81' OF 2" PE IN THE CITY OF LAS VEGAS R/W.

APPROVED FOR CONSTRUCTION
THIS APPROVAL IS FOR WORK IN CLV R/W OR CLV EASEMENTS ONLY. OBTAINING PERMISSIONS OR EASEMENTS FOR WORK SHOWN ON PRIVATE PROPERTY IS THE RESPONSIBILITY OF THE UTILITY.
[Signature]
APPROVAL DATE 12/2/2008



SYSTEM D_VALLEY_WIDE

DR. NO. 395-1-DR SYSTEM M.A.O.P. 43#

SEGMENT M.A.O.P. N/A SYSTEM M.O.P. 43#

I REVIEWED THE PROCEDURES PERFORMED AND FOUND THEM, ADEQUATE () INADEQUATE (**)

**INADEQUATE COMMENTS: _____

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

NO.	DESCRIPTION	OM	10/3/08	DATE	APPRD.
1	ADDED DRIVEWAY				

REVISIONS

UNIT NO.	UNIT TYPE	INSTL.	RET.	INSTL.	RET.
3760202	2" STL			440'±	
3760102	2" PE	87'±	19'±		
3760101	1-1/4" PE	371'±			

PROPERTY UNITS

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"/> SOAP
_____	<input type="checkbox"/> SOAP	<input type="checkbox"/> GAUGE PRESS. RED. SV#

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 _____

AS-BUILTS ACCEPTED BY _____ DATE _____

POSTED BY _____ DATE _____

POSTING QCD BY _____ DATE _____

CONSTRUCTION

INSPECTOR _____

FOREMAN _____

REVIEWED BY _____

PERMIT INFORMATION

Tax Code Area—02-0200

Tax Code Area—02-0207

CITY OF LAS VEGAS

CUSTOMERS _____ CYCLE _____ ROUTE _____ AREA 3S LV 21

ENG. TECH. <u>BILL GRENNAN</u>	PHONE <u>365-2173</u>
ACCOUNT REP. <u>N/A</u>	PHONE <u>N/A</u>
PROJECT CONTACT <u>OLIVER MONTENEGRO</u>	PHONE <u>702-365-2359</u>
SHEET NO. <u>01 OF 01</u>	SCALE <u>1" = 30'</u>
DWN. BY <u>BLA</u>	CHKD. BY <u>BLA</u>
APPRD. BY _____	DATE <u>08/25/08</u>

TITLE SI - CLV - VARIETY SCHOOL

SUNRISE AVE & 28TH STREET

107V5155-SW6

SI-CLV-VARIETY SCHOOL # 302-70 DEC 2 2008

