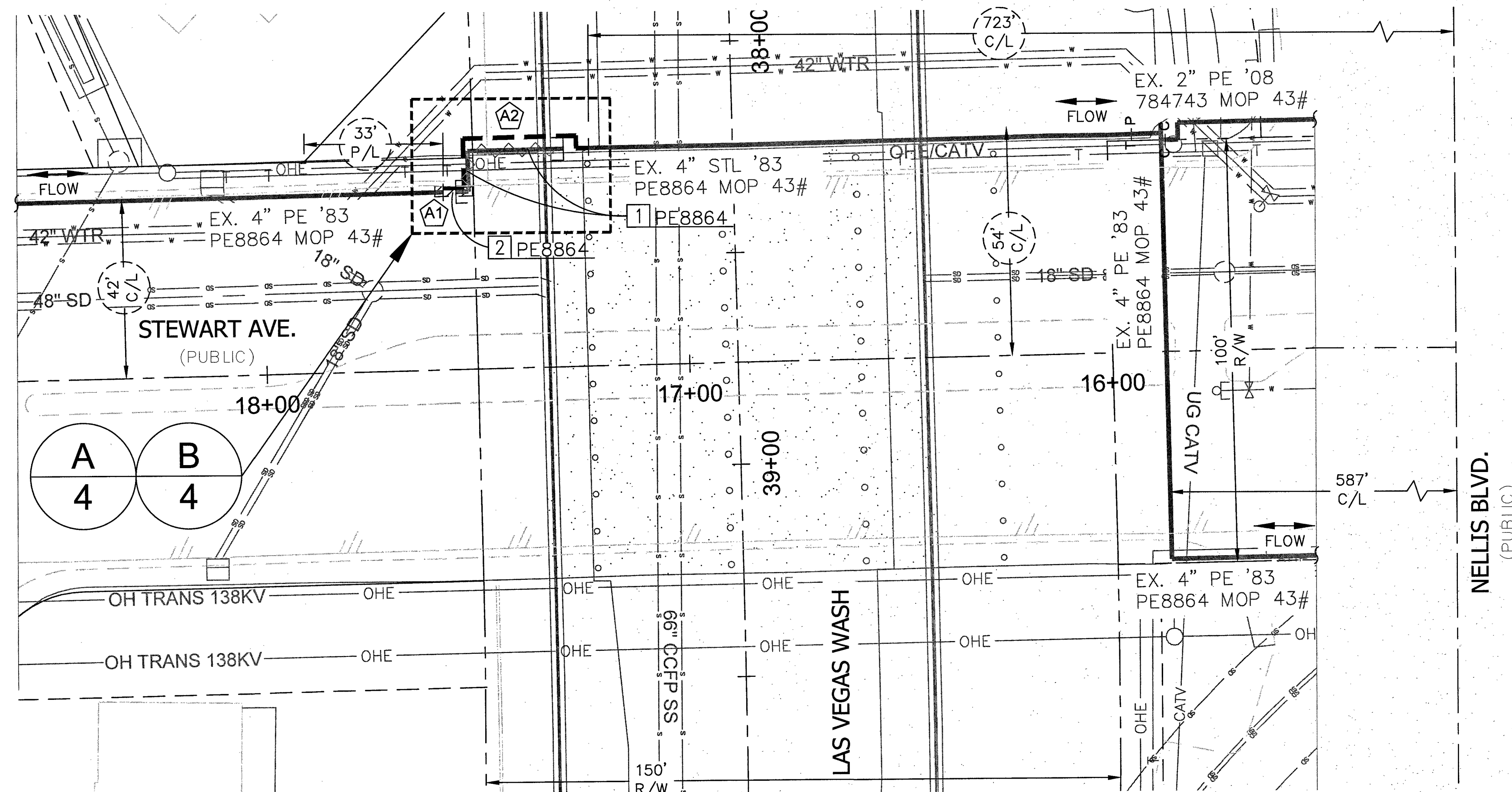
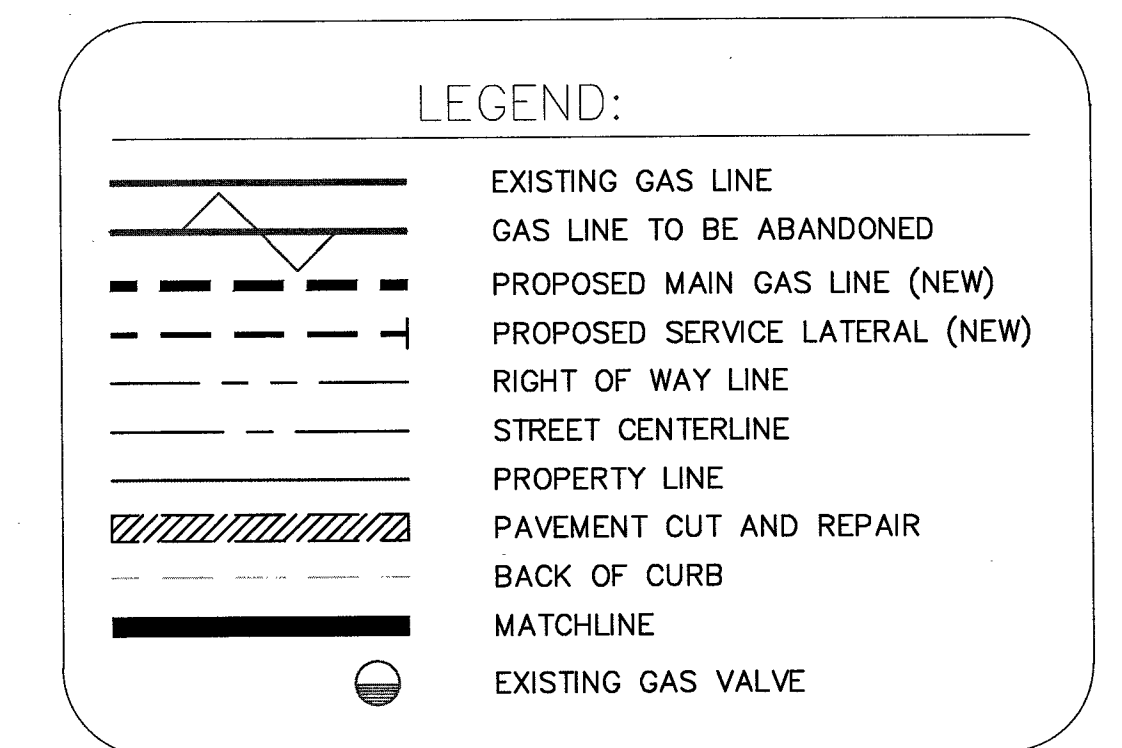
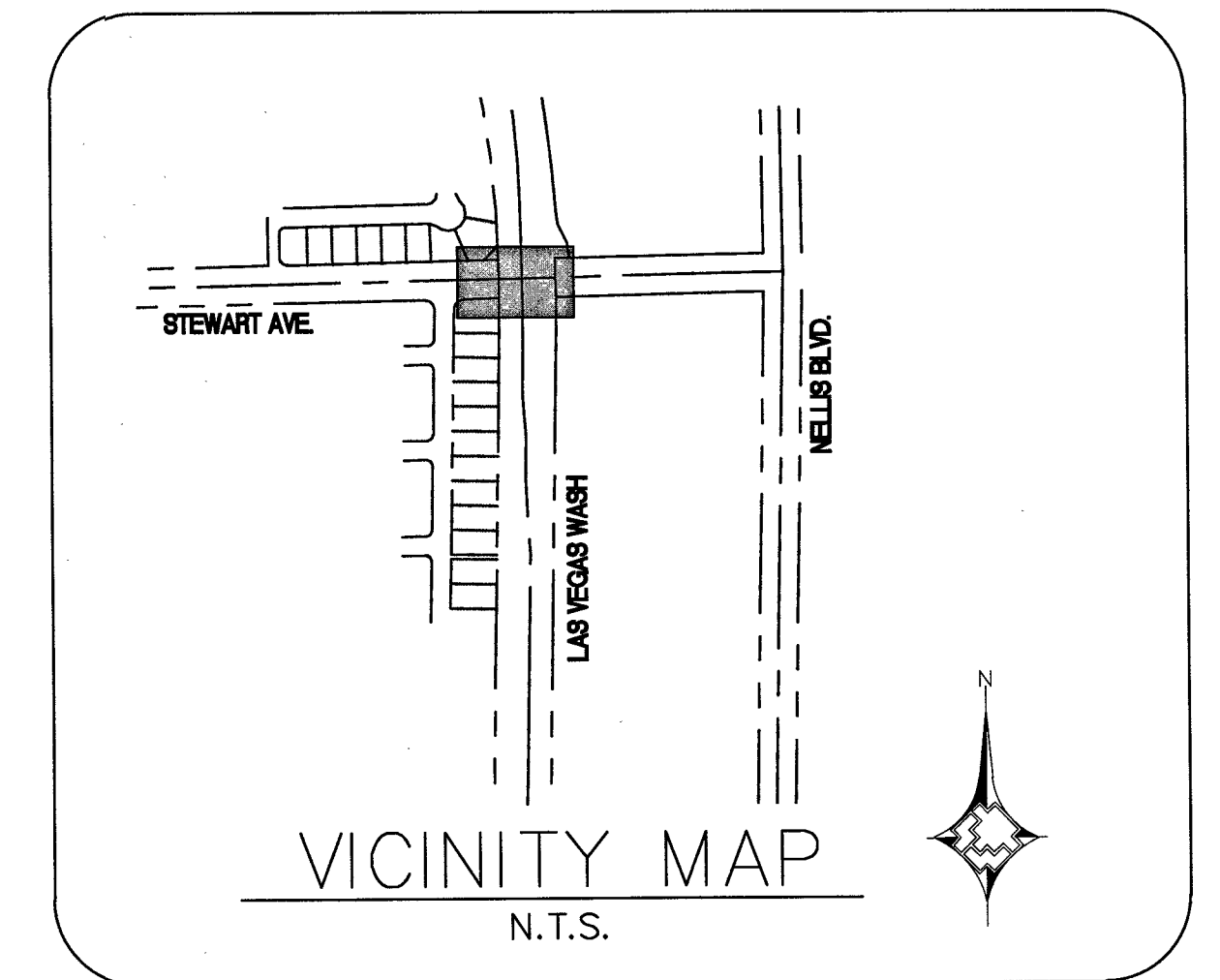
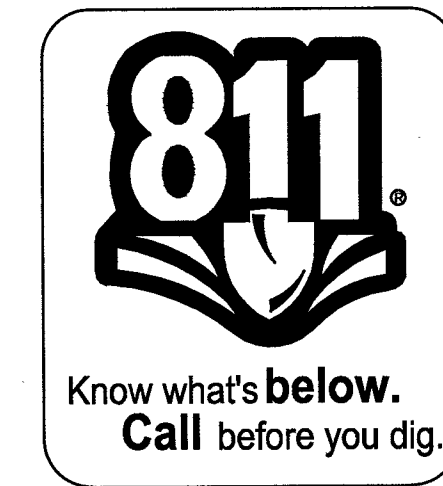
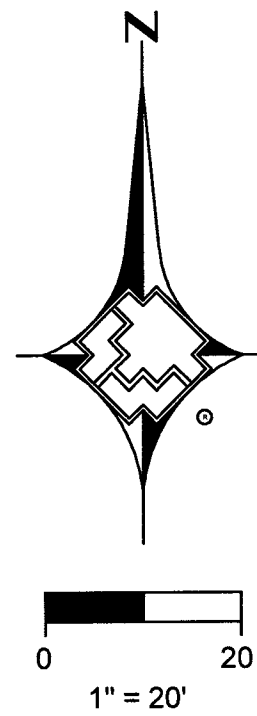




RTC NOTES:

PAVEMENT REPAIR AND/OR BACKFILL SHALL CONFORM TO RTC:

- A1 500.3
- A2 503

ABANDONED FACILITIES:

- 1 ABANDON EX. 4" STL '83 MOP 43#
- 2 ABANDON EX. 4" PE '83 MOP 43#

1. Rev. to add note to details, sheets 4 & 5. RJS 12/7/15

NO.	DESCRIPTION	BY	DATE	APPVD.



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

AS-BUILT DRAWING-PRESSURE TEST DATA

PIPE DIA.	PIPE LENGTH	PIPE TYPE	MIN. DURATION	TEST MEDIUM	TEST METHOD	START	END

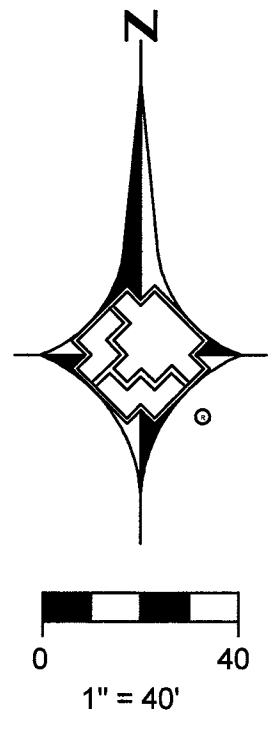
VISUAL INSPECTION CERTIFICATION

CONSTRUCTION

ISOLATION AREA

W.R. NO.

ENGINEER/TECH: BOBBIE SKROVE	PHONE: 702-365-2237
ACCOUNT REP:	PHONE:
PROJECT CONTACT:	PHONE:
SHEET NO: 3 OF 5	SCALE: 1" = 20'
DWN. BY: SEI	CHKD. BY:
DATE: 08/26/2014	APPVD. BY:
TITLE	
F-CC-STEWART & LV WASH	
4" STL RELOCATION	



ABANDONED FACILITIES:

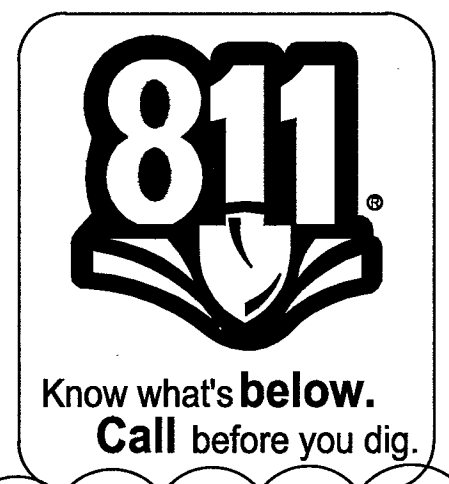
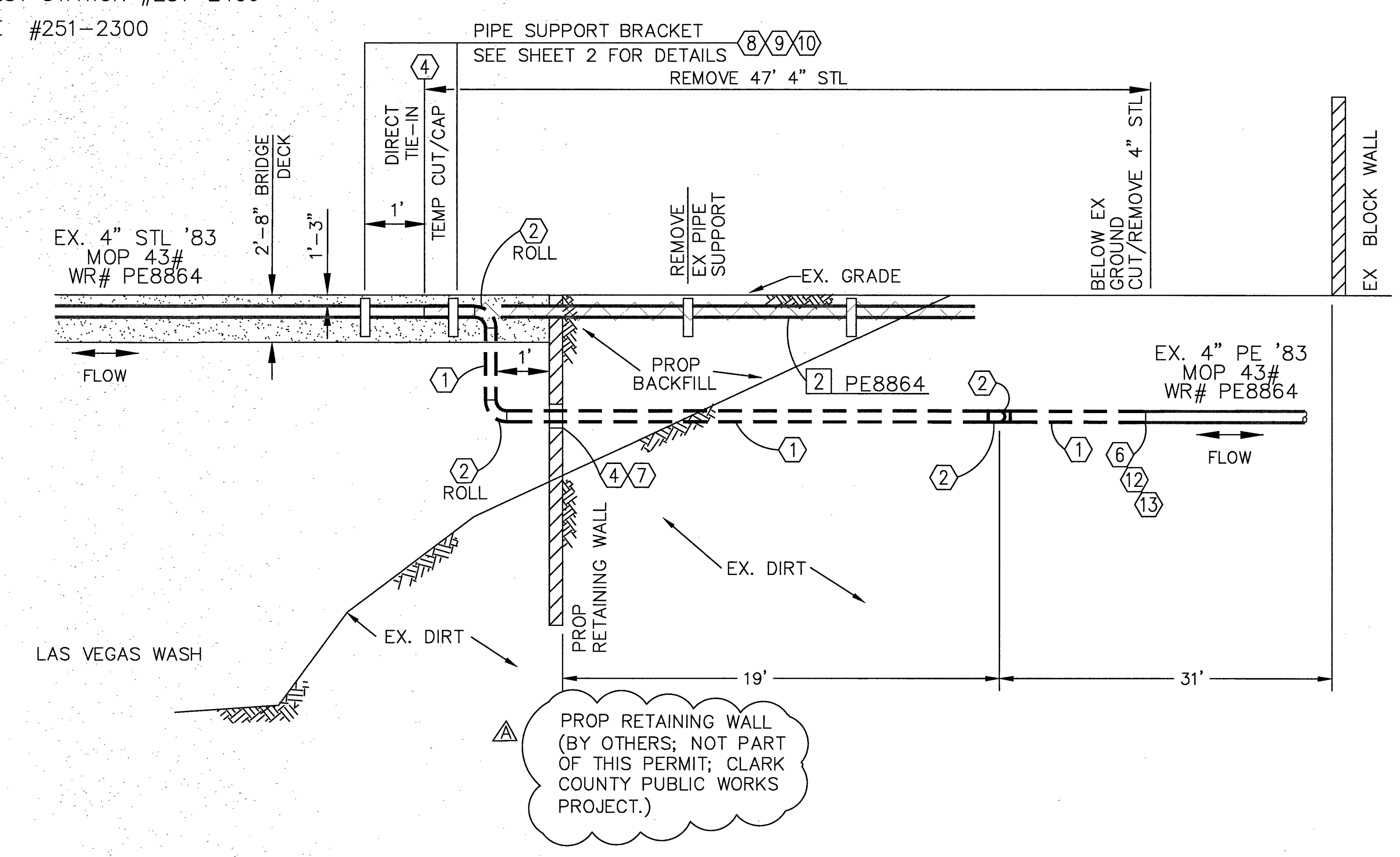
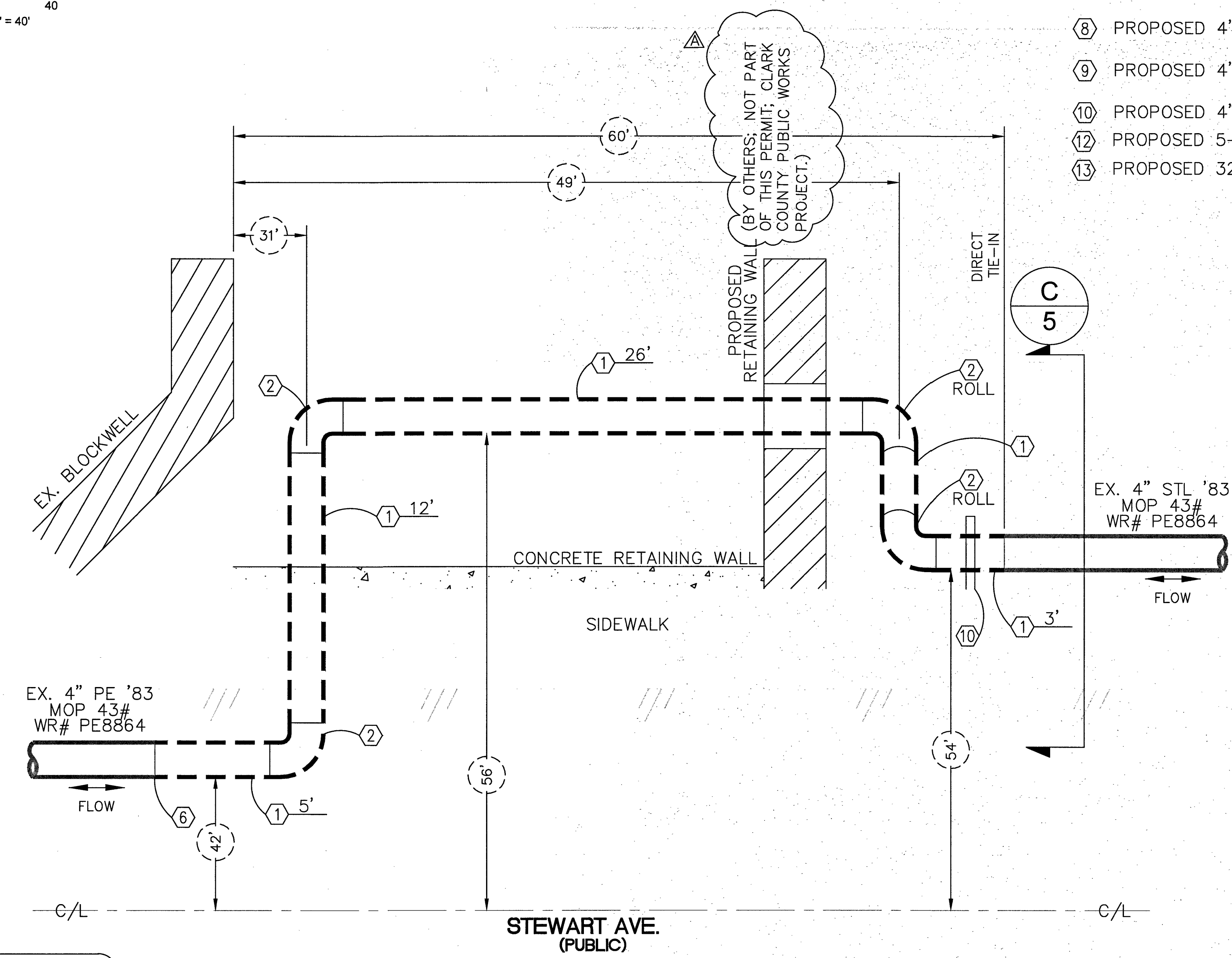
- 2 ABANDON EX. 4" PE '83 MOP 43#

PROPOSED FACILITIES:

- 1 PROPOSED 4" STL MAIN
- 2 PROPOSED 4" STL 90 DEGREE ELBOW #140-4057
- 3 PROPOSED 4" STL CAP #140-3031
- 4 PROPOSED 4" STL COLLAR #100-2385
- 6 PROPOSED 4" STL TO PE TRANSITION #160-8153
- 7 PROPOSED 4" STL CASING #170-9172
- 8 PROPOSED 4" CHAIR ROLLER #270-0170
- 9 PROPOSED 4" ROLLER #270-0172
- 10 PROPOSED 4" PIPE SUPPORT BRACKET #270-0218
- 12 PROPOSED 5-TERM TEST STATION #251-2406
- 13 PROPOSED 32# ANODE #251-2300

LEGEND:

- EXISTING GAS LINE
- GAS LINE TO BE ABANDONED
- PROPOSED MAIN GAS LINE (NEW)
- PROPOSED SERVICE LATERAL (NEW)
- RIGHT OF WAY LINE
- STREET CENTERLINE
- PROPERTY LINE
- PAVEMENT CUT AND REPAIR
- BACK OF CURB
- MATCHLINE
- EXISTING GAS VALVE



A
4
TIE-IN - TOP VIEW
(SEE SHEET 3)
N.T.S.

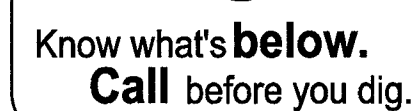
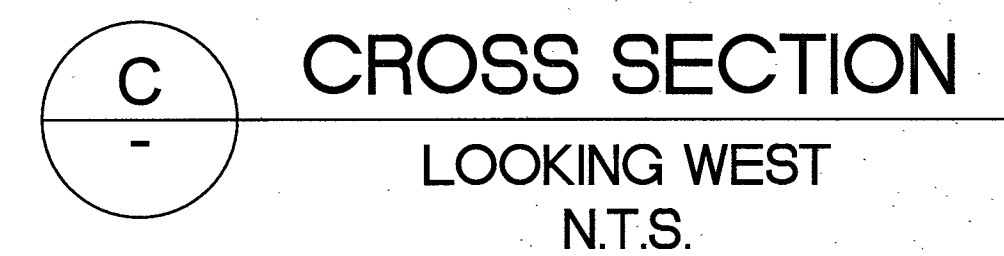
B
4
DETAIL "B"
(SEE SHEET 3)
LOOKING SOUTH
N.T.S.

1. Rev. to add note to details, sheets 4 & 5. RJS112/7/15 <table border="1"><thead><tr><th>NO.</th><th>DESCRIPTION</th><th>BY</th><th>DATE</th><th>APPVD</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>				NO.	DESCRIPTION	BY	DATE	APPVD																<table border="1"><thead><tr><th colspan="6">PROPERTY UNITS</th></tr><tr><th>TAX CODES</th><th>UNIT NO.</th><th>UNIT TYPE</th><th>INSTL. PROPOSED</th><th>RETIRED COMPLETED</th><th> </th></tr></thead><tbody><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>				PROPERTY UNITS						TAX CODES	UNIT NO.	UNIT TYPE	INSTL. PROPOSED	RETIRED COMPLETED																				<table border="1"><thead><tr><th colspan="4">AS-BUILT DRAWING-PRESSURE TEST DATA</th></tr><tr><th>PIPE DIA.</th><th>PIPE LENGTH</th><th>PIPE TYPE</th><th>MIN. DURATION</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></tbody></table>				AS-BUILT DRAWING-PRESSURE TEST DATA				PIPE DIA.	PIPE LENGTH	PIPE TYPE	MIN. DURATION													<table border="1"><thead><tr><th colspan="4">VISUAL INSPECTION CERTIFICATION</th></tr><tr><td colspan="4">I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT I HAVE PERFORMED.</td></tr><tr><td>NAME</td><td> </td><td>DATE</td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td></tr></thead></table>				VISUAL INSPECTION CERTIFICATION				I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT I HAVE PERFORMED.				NAME		DATE						<table border="1"><thead><tr><th colspan="2">CONSTRUCTION</th></tr><tr><td>INSPECTOR</td><td> </td></tr><tr><td>FOREMAN</td><td> </td></tr><tr><td>REVIEWED BY</td><td> </td></tr></thead><tbody><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></tbody></table>				CONSTRUCTION		INSPECTOR		FOREMAN		REVIEWED BY						<table border="1"><thead><tr><th colspan="2">PERMIT INFORMATION</th></tr><tr><td colspan="2">LAS VEGAS TAX CODE 02-0200</td></tr></thead><tbody><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></tbody></table>				PERMIT INFORMATION		LAS VEGAS TAX CODE 02-0200						<table border="1"><thead><tr><th>ISOLATION AREA</th><th>W.R. NO.</th></tr></thead><tbody><tr><td>271</td><td>1795652</td></tr></tbody></table>		ISOLATION AREA	W.R. NO.	271	1795652	<table border="1"><thead><tr><th>LOCATION</th><th>ATLAS #/TITLE #</th></tr></thead><tbody><tr><td>SEC 32 T20S R62E</td><td>x651y516</td></tr><tr><td>M.D.M.</td><td> </td></tr></tbody></table>		LOCATION	ATLAS #/TITLE #	SEC 32 T20S R62E	x651y516	M.D.M.		<table border="1"><thead><tr><th colspan="2">ENGINEER/TECH: BOBBIE SKROVE</th><th>PHONE: 702-365-2237</th></tr><tr><td colspan="2">ACCOUNT REP:</td><td>PHONE:</td></tr><tr><td colspan="2">PROJECT CONTACT:</td><td>PHONE:</td></tr><tr><td>SHEET NO: 4 OF 5</td><td>SCALE: N.T.S.</td><td>DATE: 08/26/2014</td></tr><tr><td>DWN. BY: SEI</td><td>CHKD. BY:</td><td>APPVD. BY:</td></tr></thead><tbody><tr><td colspan="3">TITLE</td></tr><tr><td colspan="3">F-CC-STEWART & LV WASH 4" STL RELOCATION</td></tr></tbody></table>				ENGINEER/TECH: BOBBIE SKROVE		PHONE: 702-365-2237	ACCOUNT REP:		PHONE:	PROJECT CONTACT:		PHONE:	SHEET NO: 4 OF 5	SCALE: N.T.S.	DATE: 08/26/2014	DWN. BY: SEI	CHKD. BY:	APPVD. BY:	TITLE			F-CC-STEWART & LV WASH 4" STL RELOCATION		
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	EXISTING GAS LINE
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	RIGHT OF WAY LINE
	STREET CENTERLINE
	PROPERTY LINE
	PAVEMENT CUT AND REPAIR
	BACK OF CURB
	MATCHLINE
	EXISTING GAS VALVE


SOUTHWEST GAS CORPORATION

TAX CODES	UNIT NO.	UNIT TYPE	INSTL. PROPOSED	RETIRED PROPOSED	INSTL. COMPLETED	RETIRED COMPLETED
SEE SHEET 2						

AS-BUILT DRAWING-PRESSURE TEST DATA

	TEST MEDIUM	TEST METHOD
PIPE DIA. _____	☐ AIR	☐ GAUGE
PIPE LENGTH _____	☐ NITROGEN	☐ CHART
PIPE TYPE _____	☐ WATER	☐ GAUGE/
MIN. DURATION _____	☐ SOAP	PRESS REC. N# _____
TEST PRES. (PSIG) _____	START _____	END _____
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 _____
SEE SHEET 2	
AS-BUILT'S ACCEPTED BY _____	DATE _____
POSTED BY _____	DATE _____
POSTING QCD BY _____	DATE _____

CONSTRUCTION	
INSPECTOR _____	SEE SHEET 2
FOREMAN _____	
REVIEWED BY _____	
PERMIT INFORMATION	
LAS VEGAS	
TAX CODE 02-0200	

ISOLATION AREA	W.R. NO.
271	1795652
LOCATION	ATLAS #/TILE #
SEC 32 T20S R62E	x651y516
M.D.M.	

ENGINEER/TECH: BOBBIE SKROVE		PHONE: 702-365-2237
ACCOUNT REP:		PHONE:
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