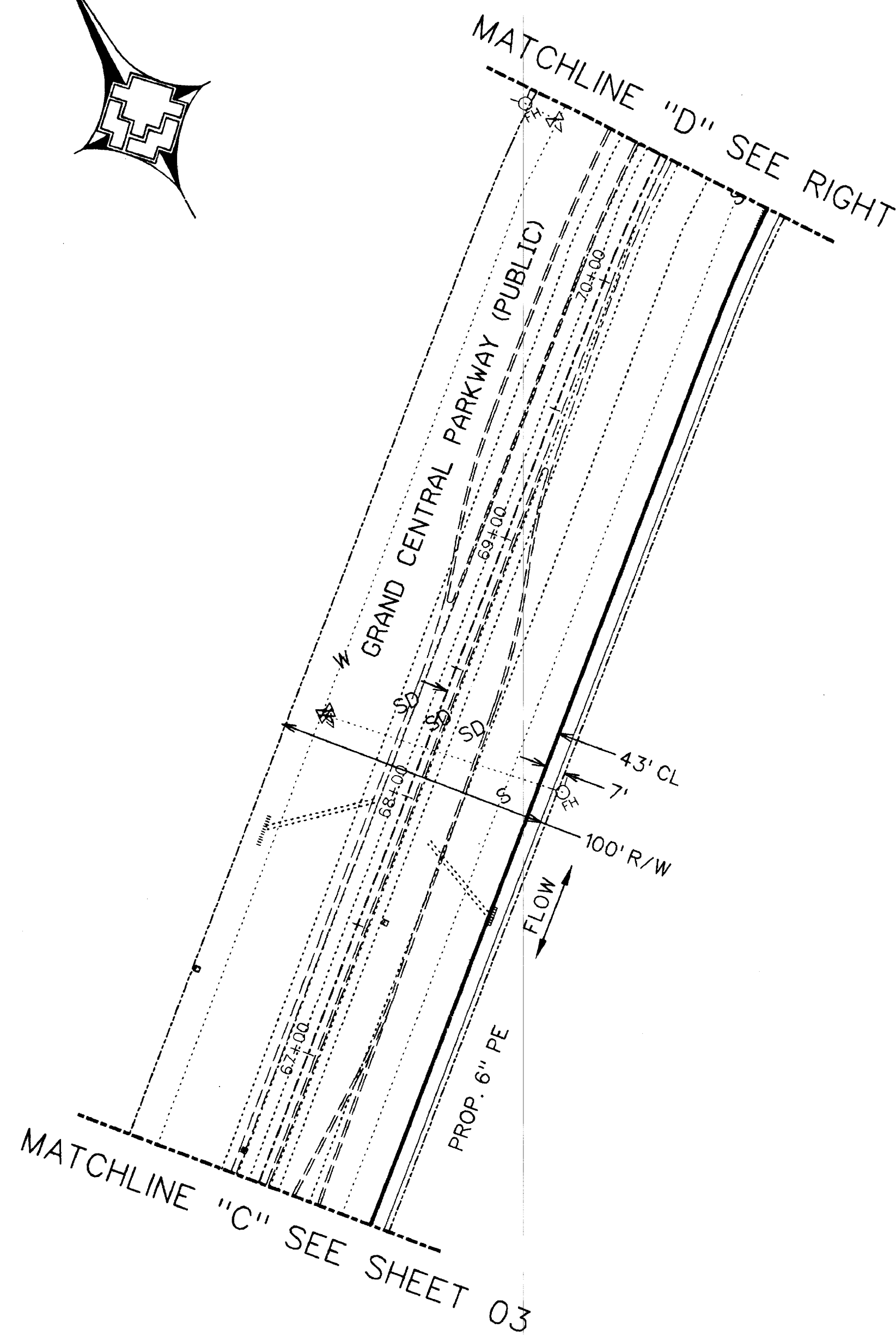
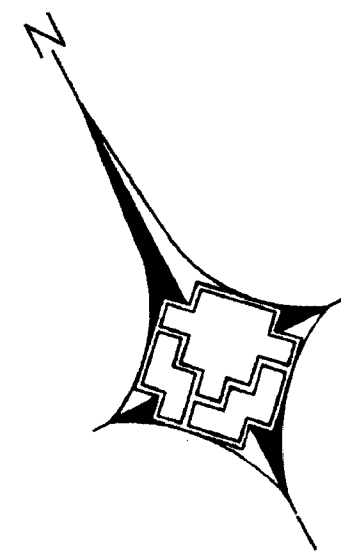
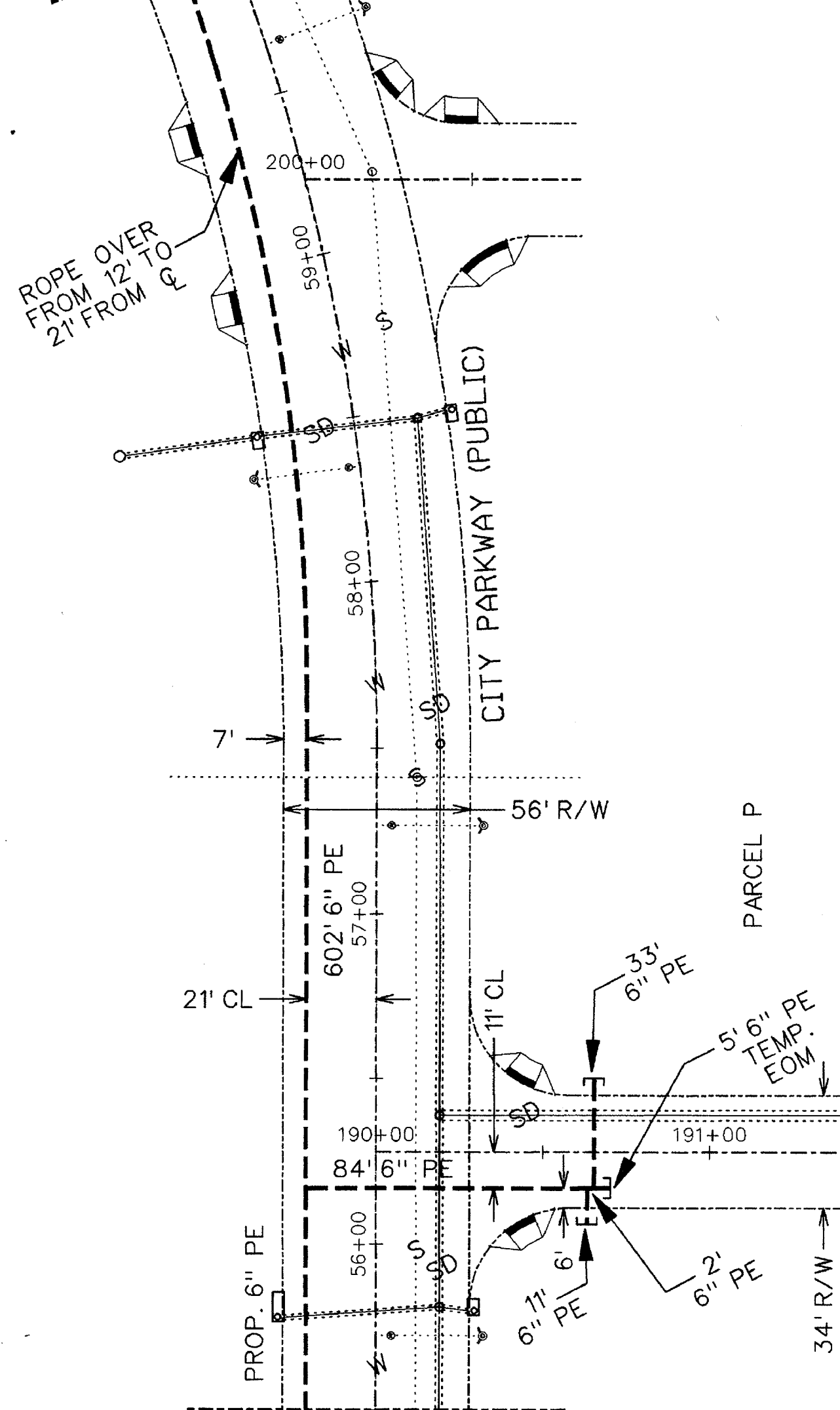
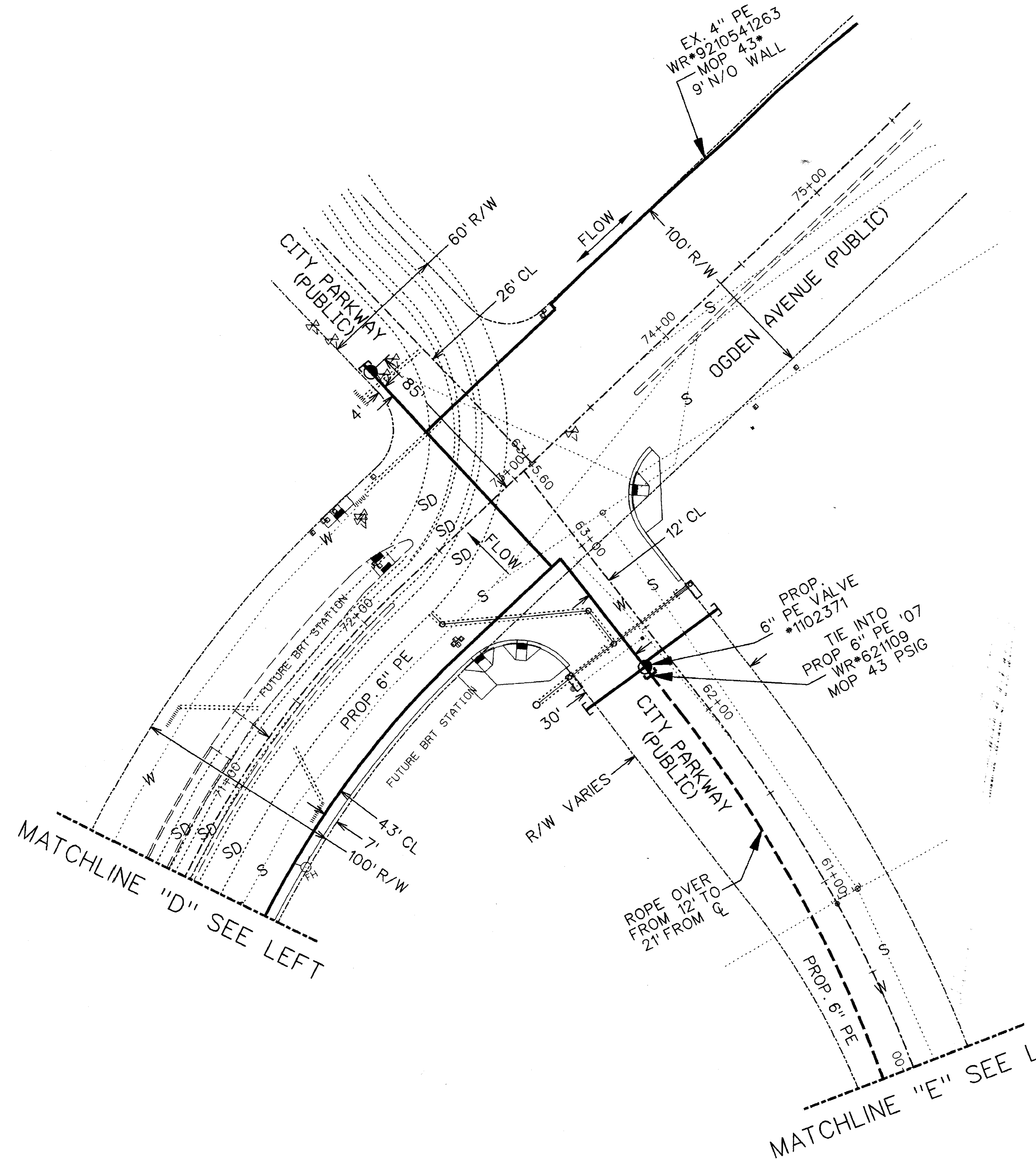




MATCHLINE "E" SEE RIGHT



MATCHLINE "C" SEE SHEET 03



Call
before you
Dig.
1-800-227-2600
UNDERGROUND SERVICE (USA)
(48 HR. BEFORE IF POSSIBLE)

NO.	DESCRIPTION	BY	DATE	APPVD.

REVISIONS



SEE SHEET 2					
UNIT NO.	UNIT TYPE	INSTL.	RET.	INSTL.	RET.
PROPERTY UNITS					

SYSTEM <u>D-S-VALLEY</u>	I REVIEWED THE PROCEDURES PERFORMED AND FOUND THEM ADEQUATE() INADEQUATE()**
DR. NO. <u>X636y434-1DR</u> SYSTEM M.A.O.P. <u>60#</u>	**INADEQUATE COMMENTS:
SEGMENT M.A.O.P. <u>N/A</u> SYSTEM M.O.P. <u>55#</u>	SIGNATURE: _____ DATE: _____
AS-BUILT DRAWING-PRESSURE TEST DATA	VISUAL INSPECTION CERTIFICATION
PIPE DIA. _____ TEST MEDIUM TEST METHOD	I HAVE VISUALLY INSPECTED ALL HEATED FUSIONS, SOLVENT CEMENT, MECHANICAL JOINTS, AND WELDS THAT I HAVE PERFORMED
PIPE LENGTH _____ ☐ AIR ☐ GAUGE	NAME _____ DATE _____
PIPE TYPE _____ ☐ NITROGEN ☐ CHART	
PIPE TYPE _____ ☐ WATER ☐ SOAP	
MIN. DURATION _____ GAUGE/PRESS REC SN# _____	
TEST PRES. (PSIG) _____ START _____ END _____	
TIME _____	AS-BUILTS ACCEPTED BY _____ DATE _____
DATE _____	POSTED BY _____ DATE _____
PERFORMED BY _____	POSTING QC'D BY _____ DATE _____

CONSTRUCTION	ISOLATION AREA	W. R. NO.
INSPECTOR _____	95	682938
FOREMAN _____	LOCATION	TILE NO.
REVIEWED BY _____	T20S.R61E	X624y516
PERMIT INFORMATION	S34	X627y510
Tax Code Area-02-0203		X627y518
CITY OF LAS VEGAS		

CUSTOMER SN/A CYCLE	ROUTE	AREA	3S
ENG. TECH. <u>BILL GRENNAN</u>	PHONE <u>36</u>	ACCOUNT REP. <u>JOHN WRIGHT</u>	PHONE <u>52</u>
PROJECT CONTACT <u>MARC JOHNSON</u>	702-220-8090	SHEET NO. <u>04 OF 04</u>	SCALE <u>1" = 40'</u>
DWN. BY <u>CME/BLA</u>	CHKD. BY <u>BLA</u>	DATE <u>07</u>	APPVD. BY _____
TITLE			
UNION PARK PHASE 2			
GRAND CENTRAL & W. CLAY			