

REDACTED





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SERVICE LINE RECORD (SLR)

JOB ORDER # 20-831126-00 FORM COMPL BY: Bob Forester REDACTED CONSTR COORD: B. Forester DATE: 08-31-2020

SERVICE ADDRESS 37 Waverly Rd CITY N. Andover TCC 8400

PSID/SITE ID 673233007 MT - MASTER TAP REF (ADDR &/OR PSID/SITE ID) CURB BOX LOCATION EFV-NCV TAP LOCATION 44 RLB/35 RRB OP PRESS HP

MAIN TO PROPERTY LINE LENGTH 21' SIZE 010 MATL P DEPTH (IN) AT INSTALL 36" OP PRESS HP DATE INSTLD/ABN 10-27-18 INSTALL MTHD OC CASING MATL REPAIR DATE 08-31-2020 REPAIR KIND Rec

PROPERTY LINE TO METER LENGTH 23' SIZE 010 MATL P DEPTH (IN) AT INSTALL 30" OP PRESS HP DATE INSTLD/ABN 10-27-18 INSTALL MTHD OC CASING MATL REPAIR DATE 08-31-2020 REPAIR KIND Rec

RETIRED PIPE (CMA ONLY) LENGTH SIZE MATL DATE INSTLD DATE ABN MAIN INFO (CMA ONLY) 12054 NEW PIPE (CMA ONLY) FTG INSTLD (CMA ONLY) 1' SIZE 010 MATL P

PULL BACK CAMERA USED AND VIDEO VERIFIED CLEAR WITH SITE INVESTIGATION PERFORMED YES NO BY: SEE RELATED SEWER LOCATE CARD YES NO POST SEWER CAMERA REQUIRED YES NO

PRESSURE TESTED PER GAS STANDARD SRV LINE PL/CV 24 MINS @ 1.57 PSIG Soap Test SRV LINE PL/CV-MTR 24 MINS @ 1.57 PSIG Soap Test PRESSURE TEST BY (SIGNATURE; THEN PRINT NAME & EMPL NUM & CO NAME) x w DeRoche William DeRoche 3451 Feeney

PRESSURE VERIFICATION 73 "w.c." PSIG CONTENT VERIFIED: PRESSURE/CONTENT VERIFICATION BY (PRINT NAME & EMPL NUM) x William DeRoche 3451

ADDITIONAL INFORMATION: Best Service Line from Pl of Sewer... (blacked out)

PERSONS MAKING WELDS, FUSIONS, AND MECHANICAL FITTING JOINTS

EMPL NUM & CO 3451 Feeney W EF SF BF M EMPL NUM & CO W EF SF BF M

POST INSTALL LOCATING PAINT FLAGGED LOCATED

MATERIAL

Table with 8 columns: SSN, DESCRIPTION, SIZE, QTY INST, SSN, DESCRIPTION, SIZE, QTY INST. Row 1: 21-65-8093, 1" Lyco Coup, 1", 2

QA/QC REVIEW BY: Jenny [Signature] QA/QC REVIEW DATE: 9/10/2020



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FOR MORE INFORMATION, REFER TO GS 3020.012 "SERVICE LINE RECORDS"

**REFERENCE CODES**

DATE FORMAT

ALL DATES TO BE IN MM-DD-YYYY  
OR MM/DD/YYYY FORMAT  
ACCEPTABLE: 01-31-2007 or 01/31/2007  
UNACCEPTABLE: 01-31-07 (MUST USE 4-DIGIT  
YEAR)

MASTER TAP

LEAVE BLANK IF ONLY 1 CUST ON SL  
(KY, MD, OH, PA, VA)

USE DASH (-) IF ONLY 1 CUST ON SL  
(MA)

- \* PRIMARY REF BY CB
- + OTHER DOWNSTR CUST
- P SPLIT SERVICE; PRIM SL
- S SPLIT SERVICE; SEC SL

DESIGNATING CB & OTHER LOCATIONS

EXAMPLE:  
32 FFB 5 RRB  
32 FT FRONT OF FRONT BLDG EDGE  
5 FEET RIGHT OF RIGHT BLDG EDGE

For service lines installed with no curb  
valve or excess flow valve, enter "NCV."

For service lines installed with no curb  
valve and with one or more excess flow  
valves, enter "EFV-NCV" or "NCV-EFV."

OP PRESS

- LP LOW PRESSURE
- IP INTERMEDIATE PRESSURE
- MP MEDIUM PRESSURE
- HP HIGH PRESSURE

SIZE CODES

(LARGER SIZES SIMILAR)

- 005 1/2 "
- 007 3/4"
- 010 1"
- 012 1-1/4"
- 015 1-1/2"
- 020 2"
- 030 3"
- 040 4"

MATERIAL CODES

- CI CAST IRON
- CU COPPER
- OT OTHER
- P PLASTIC
- PI PLASTIC INSERT
- S STEEL
- ST STEEL, TREATED
- WI WROUGHT IRON

INSTALLATION METHOD

- OC OPEN CUT
- TO TIE OVER
- PI PLASTIC INSERT
- TT TRENCHLESS TECH

CASING MATERIAL

- S BARE STEEL
- ST COATED STEEL
- P PLASTIC
- PVC PVC
- OT OTHER
- NA NOT APPLICABLE

REPAIR KIND

- CUBOX – curb box
- CUST – repair on customer-owned piping
- EFV – install/replace EFV
- FACDAM – facility damage
- LEAK – leak repair
- RCLASS - reclassification
- REC – plastic reconnect was made
- REINSP – negative reinspection
- RISER – replaced riser
- TEE – replaced or repaired tee
- VALVE – curb valve changed

OBJECT CODES FOR SKETCH

- B BLDG EDGE
- BK BACK
- C CORNER
- CB CATCH BASIN
- CEL CENTER OF EB LANE
- CLP CENTER OF PAVEMENT
- CLR CENTER OF RT OF WAY
- CNL CENTER OF NB LANE
- CO CLEANOUT (SEWER)
- COP CENTER OF PROPERTY
- CSL CENTER OF SB LANE
- CU CURB
- CWL CENTER OF WB LANE
- D DRIVEWAY EDGE
- DS DOWNSPOUT
- EP EDGE OF PAVEMENT
- ES EDGE OF SIDEWALK
- F FRONT
- G GARAGE EDGE
- L LEFT
- LAT LATERAL (SEWER)
- M METER
- MH MANHOLE
- P PORCH EDGE
- PAD TRAILER PAD
- PL PROPERTY LINE
- R RIGHT
- RW RIGHT OF WAY
- SAN SANITARY SEWER
- ST STORM SEWER
- W WATER VALVE
- Y WYE FITTING

JOINT TYPES

- BF BUTT FUSION
- EF ELECTROFUSION
- SF SOCKET FUSION
- M MECHANICAL FITTING
- W WELDED (STEEL)



REDACTED

jo num: 20-8311126-00 loc num: 8400 supervisor: 8410P PAGE: 01 of 03  
job type: 2313 specific budget: copy no: 01 on: 08/06/20  
job summary: MVI RETEST SERVICE LINES bad weather (y/n): N  
job desc: MAINTENANCE OF S.L. status: PE

cdc map num: 013 system number: 80001004 HP maop: 98.0  
located at: 37 WAVERLY RD  
begin street num: end street num:  
between:  
and:  
also known as:  
city: NORTH ANDOVER zip: 01845

originated by: U121848 on: 07/28/20 updated by: U125028 on: 08/06/20  
wms related jo num: dis related jo num:  
project id: 20-73312 project name: DYNAMIC RISK - MVI  
co/contract cd: B reimbursable (y/n): N income tax (y/n): N  
facility type: facility id:  
function type: function id:  
co premise id: psid: 673233007  
county name: ESSEX  
taxing district: 0000404 mult tax dist (y/n): \_  
incorporated place: NORTH ANDOVER  
county subdivision:  
assess district 1:  
assess district 2:  
permits required:

committed date: target date: start date: 07/31/20  
duration: 4:00 num in crew: 2 manhours: 8.0  
dpi ref #: leak grade: mult facility (y/n): N  
scheduling: 20

CUSTOMER BUSINESS PHONE: ( ) -  
MET INFO: LOC CD: 04 NUMBER: Q03655 KIND-SIZE: 210  
REG INFO: TYPE: NUM INSTLD: 0 INSPECTION:  
LOC INFO: SUBDIV: LOT NUM:  
PLMBR: PHONE: (000)000-0000  
CNTRCTR: PHONE: (000)000-0000  
CURB BOX LOC: SL (SHORT/LONG):  
MAIN LOC: LOAD MCF: 000000 PIPE SZ: 000  
LE INFO: SIZE: 000000 AMT: 0000000.00 LENGTH: 000000

Filter to extend reg vent

white on site



REDACTED

jo num: 20-8311126-00 loc num: 8400 supervisor: 8410P PAGE: 02 of 03  
job type: 2313 job summary: MVI RETEST SERVICE LINES specific budget:  
\*\*\*\*\* E X E C U T I O N \*\*\*\*\*  
remarks: \_\_\_\_\_

line markers and signs inspected (y/n): \_\_\_\_\_  
facility failures (y/n): \_\_\_\_\_ damages by others (y/n): \_\_\_\_\_  
damages to others (y/n): \_\_\_\_\_ map corrections (y/n): \_\_\_\_\_

\*\*\*\*\* C H A R G E T O I N F O R M A T I O N \*\*\*\*\*  
80-0384000-0384000-00080-02313- -89200000:100%

: \_\_\_\_\_%

\*\*\*\*\* F U R T H E R A C T I O N R E Q U I R E D \*\*\*\*\*  
job type: \_\_\_\_\_ job summary: \_\_\_\_\_  
remarks: \_\_\_\_\_

\*\*\*\*\* A T T A C H M E N T S \*\*\*\*\*  
detail: contracts: materials: X execute detail: \_\_\_\_\_  
pipe exposure: X facility: f.a.r.: X sketch: \_\_\_\_\_

I HAVE COMPLETED THIS JOB ORDER IN COMPLIANCE WITH ALL APPLICABLE POLICIES AND PROCEDURES. Bob Ford (COMPANY REPRESENTATIVE) 08-31-20, 20\_\_

\*\*\*\*\* M A T E R I A L S \*\*\*\*\*

stock description ssn	uom	quantity				inst	lost	trans	trans to/from
		est	net	ord	truck				
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

\*\*\*\*\* S O D A N D P A V I N G \*\*\*\*\*

surface broken by: \_\_\_\_\_ date broken: \_\_\_\_\_ 1  
surface broken: \_\_\_\_\_ ft from: \_\_\_\_\_  
and: \_\_\_\_\_ ft from: \_\_\_\_\_  
type broken: \_\_\_\_\_  
size of opening: \_\_\_\_\_ X \_\_\_\_\_  
depth inches: \_\_\_\_\_  
surface as found: \_\_\_\_\_  
surface as left: \_\_\_\_\_  
authorized repair size: \_\_\_\_\_ X \_\_\_\_\_ completed (y/n) \_\_\_\_\_ (no f.a.r.)  
authorized repair surface: \_\_\_\_\_  
actual repair size: \_\_\_\_\_ X \_\_\_\_\_  
actual repair kind: \_\_\_\_\_  
repaired/completed by: \_\_\_\_\_ contractor name: \_\_\_\_\_  
charge : \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %  
to jo#s \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %  
\_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %



REDACTED

jo num: 20-8311126-00 loc num: 8400 supervisor: 8410P PAGE: 03 of 03  
job type: 2313 job summary: MVI RETEST SERVICE LINES specific budget:  
\*\*\*\*\* S O D A N D P A V I N G \*\*\*\*\*  
surface broken by: \_\_\_\_\_ date broken: \_\_\_\_\_ 2  
surface broken: \_\_\_\_\_ ft from: \_\_\_\_\_  
and: \_\_\_\_\_ ft from: \_\_\_\_\_  
type broken: \_\_\_\_\_  
size of opening: \_\_\_\_\_ X \_\_\_\_\_  
depth inches: \_\_\_\_\_  
surface as found: \_\_\_\_\_  
surface as left: \_\_\_\_\_  
authorized repair size: \_\_\_\_\_ X \_\_\_\_\_ completed (y/n) \_\_\_\_\_ (no f.a.r.)  
authorized repair surface: \_\_\_\_\_  
actual repair size: \_\_\_\_\_ X \_\_\_\_\_  
actual repair kind: \_\_\_\_\_  
repaired/completed by: \_\_\_\_\_ contractor name: \_\_\_\_\_  
charge : \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %  
to jo#s \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %  
\_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %

\*\*\*\*\* P I P E E X P O S U R E \*\*\*\*\*  
located at: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
county: \_\_\_\_\_ city: \_\_\_\_\_ map num: \_\_\_\_\_  
begin street num: \_\_\_\_\_ end street num: \_\_\_\_\_  
between: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
and: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
exposure type: \_\_\_\_\_  
material: \_\_\_\_\_ pipe cond: \_\_\_\_\_ corrosion: \_\_\_\_\_ pits code: \_\_\_\_\_ intrnl corr: \_\_\_\_\_  
ctg cond: \_\_\_\_\_ ctg type: \_\_\_\_\_ ftg expsd: \_\_\_\_\_ depth cvr: \_\_\_\_\_ in mtl rmv: \_\_\_\_\_  
year installed: \_\_\_\_\_ num existing clamps: \_\_\_\_\_ pipe size code: \_\_\_\_\_  
corr contrl type: \_\_\_\_\_  
num clamps installed: \_\_\_\_\_ number anodes installed: \_\_\_\_\_ op press: \_\_\_\_\_  
pipe to soil reading: \_\_\_\_\_ volts surface cover: \_\_\_\_\_

----- existing service line data -----  
operating pressure: \_\_\_\_\_ efv (y/n): \_\_\_\_\_ main number: \_\_\_\_\_  
main size: 000 material: \_\_\_\_\_ main location: \_\_\_\_\_  
length of service: \_\_\_\_\_ ft ft  
service pipel: size: 000 material: \_\_\_\_\_ special condition: \_\_\_\_\_  
service pipe2: size: 000 material: \_\_\_\_\_ repair kind: \_\_\_\_\_  
install date: 00/00/00 00/00/00 repair date: 00/00/00 00/00/00  
master tap code: \_\_\_\_\_ master tap location: \_\_\_\_\_  
curb box location: \_\_\_\_\_ customer valve location: \_\_\_\_\_



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COLUMBIA GAS DISTRIBUTION COMPANIES  
WORK MANAGEMENT SYSTEM  
METER MANIFOLD INFORMATION

date: 08/06/2020  
time: 08:39

for job order: 20-8311126-00 site id: 673233007

EXISTING METER MANIFOLD DATA

	address	prem stat	mstr tap	meter no	kind size	mtr loc	bypass	flow lmtr	reg ins	correct?
37	WAVERLY RD	NA	B	-	Q03655	21	04	N	—	—
37	WAVERLY RD	NA	B	-	Q03655	21	04	N	—	—

ADDITIONAL METER MANIFOLD DATA

	address	prem stat	mstr tap	meter no	kind size	mtr loc	bypass	flow lmtr	reg ins	correct?

COMMENTS

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REDACTED





REDACTED





REDACTED





REDACTED





REDACTED





REDACTED





**SERVICE LINE RECORD (SLR)**

JOB ORDER # 20-83112400 FORM COMI BY: STEVE BEZEMIS REDACTED CONSTR COORD: Steve D'Agnes  
 NEW  REPLACE  ABANDON  REPAIR  SURVEY  TIE-OVER/RECONNECT DATE: 09-08-2020

SERVICE ADDRESS <u>71 WAVERLY RO.</u>						CITY <u>NORTH ANDOVER</u>			TCC <u>8400</u>				
PSID/SITE ID <u>290133004</u>		MT <u>-</u>	MASTER TAP REF (ADDR &/OR PSID/SITE ID)			CURB BOX LOCATION <u>EFV-NCU</u>		TAP LOCATION <u>20' RLFB 21 LRCB</u>		OP PRESS <u>99 PSI</u>			
MAIN TO PROPERTY LINE OR CURB VALVE	LENGTH <u>2'</u>	SIZE <u>010</u>	MATL <u>P</u>	DEPTH (IN) AT INSTALL <u>36</u>	OP PRESS <u>HP</u>	DATE INSTLD/ABN <u>10-16-2018</u>	INSTALL MTHD <u>..</u>	CASING MATL <u>P</u>	REPAIR DATE <u>09-08-2020</u>	REPAIR KIND <u>REC</u>			
PROPERTY LINE OR CURB VALVE TO METER	LENGTH <u>14"</u>	SIZE <u>005</u>	MATL <u>P</u>	DEPTH (IN) AT INSTALL <u>36</u>	OP PRESS <u>HP</u>	DATE INSTLD/ABN <u>10-16-2018</u>	INSTALL MTHD	CASING MATL <u>P</u>	REPAIR DATE <u>09-08-2020</u>	REPAIR KIND <u>REC</u>			
RETIRED PIPE (CMA ONLY)	LENGTH	SIZE	MATL	DATE INSTLD		DATE ABN		MAIN INFO (CMA ONLY) <u>12 ST</u>	MAIN SIZE-MATL	NEW PIPE FTG INSTLD (CMA ONLY)	LENGTH <u>1'</u>	SIZE <u>005</u>	MATL <u>P</u>
PULL BACK CAMERA USED AND VIDEO VERIFIED CLEAR WITH SITE INVESTIGATION PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO BY:						SEE RELATED SEWER LOCATE CARD <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			POST SEWER CAMERA REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
PRESSURE TESTED PER GAS STANDARD <input checked="" type="checkbox"/> SRV LINE M-PL/CV <u>15</u> MINS @ <u>156</u> PSIG <input checked="" type="checkbox"/> Soap Test <input type="checkbox"/> SRV LINE PL/CV-MTR <u>15</u> MINS @ <u>156</u> PSIG <input checked="" type="checkbox"/> Soap Test						PRESSURE TEST BY (SIGNATURE; THEN PRINT NAME & EMPL NUM & CO NAME) <u>W DeRoche William DeRoche 302340 Feeney</u>							
PRESSURE VERIFICATION <u>73</u> <input type="checkbox"/> "w.c." <input checked="" type="checkbox"/> PSIG CONTENT VERIFIED: <input checked="" type="checkbox"/>						PRESSURE/CONTENT VERIFICATION BY (PRINT NAME & EMPL NUM) <u>William DeRoche 302340</u>							
ADDITIONAL INFORMATION <u>ALL FITTINGS EXPLODED - SOAP TEST BEFORE WELD TEST AND...</u>													

**PERSONS MAKING WELDS, FUSIONS, AND MECHANICAL FITTING JOINTS**

EMPL NUM & CO <u>302340 Feeney</u> <input type="checkbox"/> W <input type="checkbox"/> EF <input type="checkbox"/> SF <input type="checkbox"/> BF <input checked="" type="checkbox"/> M	EMPL NUM & CO <input type="checkbox"/> W <input type="checkbox"/> EF <input type="checkbox"/> SF <input type="checkbox"/> BF <input type="checkbox"/> M
EMPL NUM & CO <input type="checkbox"/> W <input type="checkbox"/> EF <input type="checkbox"/> SF <input type="checkbox"/> BF <input type="checkbox"/> M	EMPL NUM & CO <input type="checkbox"/> W <input type="checkbox"/> EF <input type="checkbox"/> SF <input type="checkbox"/> BF <input type="checkbox"/> M

POST INSTALL LOCATING  PAINT  FLAGGED  LOCATED

**MATERIAL**

SSN	DESCRIPTION	SIZE	QTY INST	SSN	DESCRIPTION	SIZE	QTY INST
	<u>PREVIOUSLY INSTALLED</u>				<u>NEWLY INSTALLED</u>		
	<u>GF STEEL SERV. T TRANSITION</u>	<u>3/4 X 1"</u>	<u>1</u>	<u>21-65-8108</u>	<u>Lycos Cplg</u>	<u>1/2"</u>	<u>2</u>
<u>16-03-822</u>	<u>UMAC 700</u>	<u>1"</u>	<u>1</u>				
<u>43-04-810</u>	<u>EF Cplg</u>	<u>1"</u>	<u>1</u>				
<u>43-10-8520</u>	<u>" "</u>	<u>1" X 1/2"</u>	<u>1</u>				

QA/QC REVIEW BY: [Signature] QA/QC REVIEW DATE: 9/12/2020



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- S SPLIT SERVICE; SEC SL

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- PI PLASTIC INSERT
- S STEEL
- ST STEEL, TREATED
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- ES EDGE OF SIDEWALK
- F FRONT
- G GARAGE EDGE
- L LEFT
- LAT LATERAL (SEWER)
- M METER
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- PAD TRAILER PAD
- PL PROPERTY LINE
- R RIGHT
- RW RIGHT OF WAY
- SAN SANITARY SEWER
- ST STORM SEWER
- W WATER VALVE
- Y WYE FITTING

JOINT TYPES

- BF BUTT FUSION
- EF ELECTROFUSION
- SF SOCKET FUSION
- M MECHANICAL FITTING
- W WELDED (STEEL)



jo num: 20-8311124-00 loc num: 8400 <sup>REDACTED</sup> supervisor: 8410P PAGE: 01 of 03  
job type: 2313 specific budget: copy no: 01 on: 08/06/20  
job summary: MVI RETEST SERVICE LINES bad weather (y/n): N  
job desc: MAINTENANCE OF S.L. status: PE

cdc map num: 013 system number: 80001004 HP maop: 98.0  
located at: 71 WAVERLY RD  
begin street num: end street num:  
between:  
and:  
also known as:  
city: NORTH ANDOVER zip: 01845

originated by: U121848 on: 07/28/20 updated by: U125028 on: 08/06/20  
wms related jo num: dis related jo num:  
project id: 20-73312 project name: DYNAMIC RISK - MVI  
co/contract cd: B reimbursable (y/n): N income tax (y/n): N  
facility type: facility id:  
function type: function id:  
co premise id: psid: 290133004  
county name: ESSEX  
taxing district: 0000404 mult tax dist (y/n): \_  
incorporated place: NORTH ANDOVER  
county subdivision:  
assess district 1:  
assess district 2:  
permits required:

committed date: target date: start date: 07/31/20  
duration: 4:00 num in crew: 2 manhours: 8.0  
dpi ref #: leak grade: mult facility (y/n): N  
scheduling: 20

CUSTOMER BUSINESS PHONE: ( ) -  
MET INFO: LOC CD: 02 NUMBER: Q05627 KIND-SIZE: 210  
REG INFO: TYPE: NUM INSTLD: 0 INSPECTION:  
LOC INFO: SUBDIV: LOT NUM:  
PLMBR: PHONE: (000)000-0000  
CNTRCTR: PHONE: (000)000-0000  
CURB BOX LOC: NCV-EFV SL (SHORT/LONG):  
MAIN LOC: LOAD MCF: 000000 PIPE SZ: 000  
LE INFO: SIZE: 000000 AMT: 0000000.00 LENGTH: 000000



REDACTED

jo num: 20-8311124-00 loc num: 8400 supervisor: 8410P PAGE: 02 of 03  
job type: 2313 job summary: MVI RETEST SERVICE LINES specific budget:

\*\*\*\*\* E X E C U T I O N \*\*\*\*\*

remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

line markers and signs inspected (y/n): \_\_\_\_\_  
facility failures (y/n): \_\_\_\_\_ damages by others (y/n): \_\_\_\_\_  
damages to others (y/n): \_\_\_\_\_ map corrections (y/n): \_\_\_\_\_

\*\*\*\*\* C H A R G E T O I N F O R M A T I O N \*\*\*\*\*  
80-0384000-0384000-00080-02313- -89200000:100%

\_\_\_\_\_ : \_\_\_\_\_%

\*\*\*\*\* F U R T H E R A C T I O N R E Q U I R E D \*\*\*\*\*

job type: \_\_\_\_\_ job summary: \_\_\_\_\_  
remarks: \_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\* A T T A C H M E N T S \*\*\*\*\*

detail: contracts: materials: X execute detail:  
pipe exposure: X facility: f.a.r.: X sketch: \_\_\_\_\_

I HAVE COMPLETED THIS JOB ORDER IN COMPLIANCE WITH ALL APPLICABLE POLICIES AND PROCEDURES. Steve Byrne (COMPANY REPRESENTATIVE) Sept 8, 2020  
2020

\*\*\*\*\* M A T E R I A L S \*\*\*\*\*

stock description	uom	quantity				inst	lost	trans	trans to/from
		est	net	ord	truck				
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

\*\*\*\*\* S O D A N D P A V I N G \*\*\*\*\*

surface broken by: \_\_\_\_\_ date broken: \_\_\_\_\_ 1  
surface broken: \_\_\_\_\_ ft from: \_\_\_\_\_  
and: \_\_\_\_\_ ft from: \_\_\_\_\_

type broken: \_\_\_\_\_  
size of opening: \_\_\_\_\_ X \_\_\_\_\_

depth inches: \_\_\_\_\_  
surface as found: \_\_\_\_\_

surface as left: \_\_\_\_\_  
authorized repair size: \_\_\_\_\_ X \_\_\_\_\_ completed (y/n) \_\_\_\_\_ (no f.a.r.)

authorized repair surface: \_\_\_\_\_  
actual repair size: \_\_\_\_\_ X \_\_\_\_\_

actual repair kind: \_\_\_\_\_

repaired/completed by: \_\_\_\_\_ contractor name: \_\_\_\_\_

charge : \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_%  
to jo#s \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_%  
\_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_%



REDACTED

jo num: 20-8311124-00 loc num: 8400 supervisor: 8410P PAGE: 03 of 03  
job type: 2313 job summary: MVI RETEST SERVICE LINES specific budget:

\*\*\*\*\* S O D A N D P A V I N G \*\*\*\*\*

surface broken by: \_\_\_\_\_ date broken: \_\_\_\_\_ 2

surface broken: \_\_\_\_\_ ft from: \_\_\_\_\_

and: \_\_\_\_\_ ft from: \_\_\_\_\_

type broken: \_\_\_\_\_

size of opening: \_\_\_\_\_ X \_\_\_\_\_

depth inches: \_\_\_\_\_

surface as found: \_\_\_\_\_

surface as left: \_\_\_\_\_

authorized repair size: \_\_\_\_\_ X \_\_\_\_\_ completed (y/n) \_\_\_\_\_ (no f.a.r.)

authorized repair surface: \_\_\_\_\_

actual repair size: \_\_\_\_\_ X \_\_\_\_\_

actual repair kind: \_\_\_\_\_

repaired/completed by: \_\_\_\_\_ contractor name: \_\_\_\_\_

charge : \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %

to jo#s \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %

\_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %

\*\*\*\*\* P I P E E X P O S U R E \*\*\*\*\*

located at: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

county: \_\_\_\_\_ city: \_\_\_\_\_ map num: \_\_\_\_\_

begin street num: \_\_\_\_\_ end street num: \_\_\_\_\_

between: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

and: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

exposure type: \_\_\_\_\_

material: \_\_\_\_\_ pipe cond: \_\_\_\_\_ corrosion: \_\_\_\_\_ pits code: \_\_\_\_\_ intrnl corr: \_\_\_\_\_

ctg cond: \_\_\_\_\_ ctg type: \_\_\_\_\_ ftg expsd: \_\_\_\_\_ depth cvr: \_\_\_\_\_ in mtl rmv: \_\_\_\_\_

year installed: \_\_\_\_\_ num existing clamps: \_\_\_\_\_ pipe size code: \_\_\_\_\_

corr contrl type: \_\_\_\_\_

num clamps installed: \_\_\_\_\_ number anodes installed: \_\_\_\_\_ op press: \_\_\_\_\_

pipe to soil reading: \_\_\_\_\_ volts surface cover: \_\_\_\_\_

----- existing service line data -----

operating pressure: \_\_\_\_\_ efv (y/n): \_\_\_\_\_ main number: \_\_\_\_\_

main size: 000 material: \_\_\_\_\_ main location: \_\_\_\_\_

length of service: \_\_\_\_\_ ft ft

service pipel: size: 000 material: \_\_\_\_\_ special condition: \_\_\_\_\_

service pipe2: size: 000 material: \_\_\_\_\_ repair kind: \_\_\_\_\_

install date: 00/00/00 00/00/00 repair date: 00/00/00 00/00/00

master tap code: \_\_\_\_\_ master tap location: \_\_\_\_\_

curb box location: \_\_\_\_\_ customer valve location: \_\_\_\_\_



REDACTED  
 COLUMBIA GAS DISTRIBUTION COMPANIES  
 WORK MANAGEMENT SYSTEM  
 METER MANIFOLD INFORMATION

for job order: 20-8311124-00      site id: 290133004

EXISTING METER MANIFOLD DATA

address		prem stat	mstr tap	meter no	kind size	mtr loc	bypass	flow lmtr	reg ins	correct?
71	WAVERLY RD	NA	I	-	Q05627	21	02	Y	—	—
71	WAVERLY RD	NA	I	-	Q05627	21	02	Y	—	—

ADDITIONAL METER MANIFOLD DATA

address		prem stat	mstr tap	meter no	kind size	mtr loc	bypass	flow lmtr	reg ins	correct?

COMMENTS

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REDACTED





REDACTED





REDACTED

**GASBREAKER™ EXCESS FLOW® VALVE**  
**UWACO® SERIES 700**

1 CTS .101 W      EFVB

P41091818AP

DESIGN PR. PE 3408/4710

**FLOW**

MANUFACTURED BY:  
Continental Industries  
TULSA, OK 74116  
DRY TESTED



REDACTED





REDACTED





SERVICE LINE RECORD (SLR)

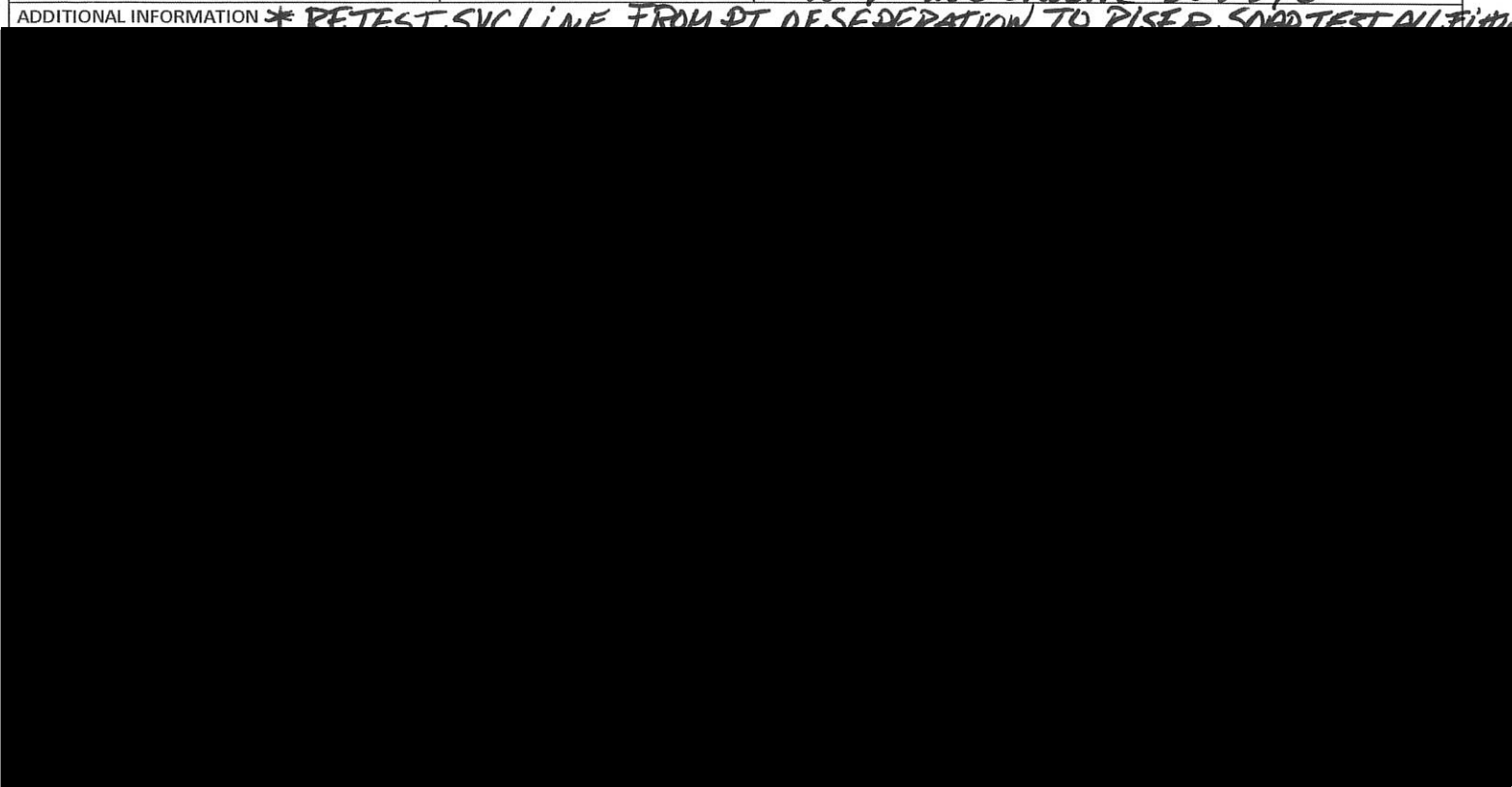
JOB ORDER # 20-831127-00 FORM COMPL BY B FORESTEIR REDACTED

CONSTR COORD: B FORESTEIR

NEW  REPLACE  ABANDON  REPAIR  SURVEY  TIE-OVER  RECONNECT

DATE: 09-09-2020

SERVICE ADDRESS <u>147 WAVERLY</u>					CITY <u>N. ANDOVER</u>					TWP <u>8400</u>		
PSID/SITE ID <u>893233007</u>		MASTER TAP REF (ADDR &/OR PSID/SITE ID)			CURB BOX LOCATION <u>EFV-NCV</u>			TAP LOCATION <u>30' RR / 31' LR</u>		OP PRESS <u>HP</u>		
MAIN TO PROPERTY LINE		LENGTH <u>4'</u>	SIZE <u>010</u>	MATL <u>P</u>	DEPTH (IN) AT INSTALL	OP PRESS <u>HP</u>	DATE INSTLD/ABN <u>11/16/18</u>	INSTALL MTHD <u>PI</u>	CASING MATL	REPAIR DATE <u>09-09-2020</u>	REPAIR KIND <u>REC</u>	
PROPERTY LINE TO METER		LENGTH <u>22'</u>	SIZE <u>010</u>	MATL <u>P</u>	DEPTH (IN) AT INSTALL	OP PRESS <u>HP</u>	DATE INSTLD/ABN <u>11/16/18</u>	INSTALL MTHD <u>PI</u>	CASING MATL	REPAIR DATE <u>09-09-2020</u>	REPAIR KIND <u>REC</u>	
RETIRED PIPE (CMA ONLY)		LENGTH	SIZE	MATL	DATE INSTLD	DATE ABN	MAIN INFO (CMA ONLY) <u>120 SI</u>	MAIN SIZE-MATL	NEW PIPE FTG INSTLD (CMA ONLY)	LENGTH <u>1'</u>	SIZE <u>010</u>	MATL <u>P</u>
PULL BACK CAMERA USED AND VIDEO VERIFIED CLEAR WITH SITE INVESTIGATION PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO BY:						SEE RELATED SEWER LOCATE CARD <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			POST SEWER CAMERA REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
PRESSURE TESTED PER GAS STANDARD						PRESSURE TEST BY (SIGNATURE; THEN PRINT NAME & EMPL NUM & CO NAME)						
<input checked="" type="checkbox"/> SRV LINE PL/PL/CV <u>20</u> MINS @ <u>1.55</u> PSIG <input checked="" type="checkbox"/> Soap Test <input checked="" type="checkbox"/> SRV LINE PL/CV-MTR <u>20</u> MINS @ <u>1.55</u> PSIG <input checked="" type="checkbox"/> Soap Test						<i>X W. DeRoche</i> William DeRoche 302340 Fenway						
PRESSURE VERIFICATION <u>75 lb</u>						PRESSURE/CONTENT VERIFICATION BY (PRINT NAME & EMPL NUM)						
<input type="checkbox"/> "w.c." <input checked="" type="checkbox"/> PSIG CONTENT VERIFIED: <input checked="" type="checkbox"/>						<i>X William DeRoche</i> William DeRoche 302340						
ADDITIONAL INFORMATION <u>* RETEST SVCLINE FROM PT OF SEPARATION TO RISED SNOOTEST ALL FITTING</u>												



PERSONS MAKING WELDS, FUSIONS, AND MECHANICAL FITTING JOINTS														
EMPL NUM & CO <u>X 302340 Fenway</u>				<input type="checkbox"/> W <input type="checkbox"/> EF <input type="checkbox"/> SF <input checked="" type="checkbox"/> BF <input checked="" type="checkbox"/> M	EMPL NUM & CO				<input type="checkbox"/> W <input type="checkbox"/> EF <input type="checkbox"/> SF <input type="checkbox"/> BF <input type="checkbox"/> M	EMPL NUM & CO				<input type="checkbox"/> W <input type="checkbox"/> EF <input type="checkbox"/> SF <input type="checkbox"/> BF <input type="checkbox"/> M
POST INSTALL LOCATING <input checked="" type="checkbox"/> PAINT <input type="checkbox"/> FLAGGED <input type="checkbox"/> LOCATED														
MATERIAL														
SSN	DESCRIPTION	SIZE	QTY INST	SSN	DESCRIPTION	SIZE	QTY INST	SSN	DESCRIPTION	SIZE	QTY INST			
<u>413-04-810</u>	<u>EF 1CTS COUP</u>	<u>1"</u>	<u>1</u>											
<u>21-65-8093</u>	<u>LYCO COUP</u>	<u>1"</u>	<u>1</u>											
QA/QC REVIEW BY: <u>Jenny Angreen</u>						QA/QC REVIEW DATE: <u>9/14/2020</u>								



FOR MORE INFORMATION, REFER TO GS 3020.012 "SERVICE LINE RECORDS"

**REFERENCE CODES**

DATE FORMAT

ALL DATES TO BE IN MM-DD-YYYY  
OR MM/DD/YYYY FORMAT  
ACCEPTABLE: 01-31-2007 or 01/31/2007  
UNACCEPTABLE: 01-31-07 (MUST USE 4-DIGIT  
YEAR)

MASTER TAP

LEAVE BLANK IF ONLY 1 CUST ON SL  
(KY, MD, OH, PA, VA)

USE DASH (-) IF ONLY 1 CUST ON SL  
(MA)

- \* PRIMARY REF BY CB
- + OTHER DOWNSTR CUST
- P SPLIT SERVICE; PRIM SL
- S SPLIT SERVICE; SEC SL

DESIGNATING CB & OTHER LOCATIONS

EXAMPLE:  
32 FFB 5 RRB  
32 FT FRONT OF FRONT BLDG EDGE  
5 FEET RIGHT OF RIGHT BLDG EDGE

For service lines installed with no curb  
valve or excess flow valve, enter "NCV."

For service lines installed with no curb  
valve and with one or more excess flow  
valves, enter "EFV-NCV" or "NCV-EFV."

OP PRESS

- LP LOW PRESSURE
- IP INTERMEDIATE PRESSURE
- MP MEDIUM PRESSURE
- HP HIGH PRESSURE

SIZE CODES

(LARGER SIZES SIMILAR)

- 005 1/2 "
- 007 3/4"
- 010 1"
- 012 1-1/4"
- 015 1-1/2"
- 020 2"
- 030 3"
- 040 4"

MATERIAL CODES

- CI CAST IRON
- CU COPPER
- OT OTHER
- P PLASTIC
- PI PLASTIC INSERT
- S STEEL
- ST STEEL, TREATED
- WI WROUGHT IRON

INSTALLATION METHOD

- OC OPEN CUT
- TO TIE OVER
- PI PLASTIC INSERT
- TT TRENCHLESS TECH

CASING MATERIAL

- S BARE STEEL
- ST COATED STEEL
- P PLASTIC
- PVC PVC
- OT OTHER
- NA NOT APPLICABLE

REPAIR KIND

- CUBOX – curb box
- CUST – repair on customer-owned piping
- EFV – install/replace EFV
- FACDAM – facility damage
- LEAK – leak repair
- RCLASS - reclassification
- REC – plastic reconnect was made
- REINSP – negative reinspection
- RISER – replaced riser
- TEE – replaced or repaired tee
- VALVE – curb valve changed

OBJECT CODES FOR SKETCH

- B BLDG EDGE
- BK BACK
- C CORNER
- CB CATCH BASIN
- CEL CENTER OF EB LANE
- CLP CENTER OF PAVEMENT
- CLR CENTER OF RT OF WAY
- CNL CENTER OF NB LANE
- CO CLEANOUT (SEWER)
- COP CENTER OF PROPERTY
- CSL CENTER OF SB LANE
- CU CURB
- CWL CENTER OF WB LANE
- D DRIVEWAY EDGE
- DS DOWNSPOUT
- EP EDGE OF PAVEMENT
- ES EDGE OF SIDEWALK
- F FRONT
- G GARAGE EDGE
- L LEFT
- LAT LATERAL (SEWER)
- M METER
- MH MANHOLE
- P PORCH EDGE
- PAD TRAILER PAD
- PL PROPERTY LINE
- R RIGHT
- RW RIGHT OF WAY
- SAN SANITARY SEWER
- ST STORM SEWER
- W WATER VALVE
- Y WYE FITTING

JOINT TYPES

- BF BUTT FUSION
- EF ELECTROFUSION
- SF SOCKET FUSION
- M MECHANICAL FITTING
- W WELDED (STEEL)



REDACTED

jo num: 20-8311127-00 loc num: 8400 supervisor: 8410P PAGE: 01 of 03  
job type: 2313 specific budget: copy no: 01 on: 08/06/20  
job summary: MVI RETEST SERVICE LINES bad weather (y/n): N  
job desc: MAINTENANCE OF S.L. status: PE

cdc map num: 013 system number: 80001004 HP maop: 98.0  
located at: 147 WAVERLY RD  
begin street num: end street num:  
between:  
and:  
also known as:  
city: NORTH ANDOVER zip: 01845

originated by: U121848 on: 07/28/20 updated by: U125028 on: 08/06/20  
wms related jo num: dis related jo num:  
project id: 20-73312 project name: DYNAMIC RISK - MVI  
co/contract cd: B reimbursable (y/n): N income tax (y/n): N  
facility type: facility id:  
function type: function id:  
co premise id: psid: 893233007  
county name: ESSEX  
taxing district: 0000404 mult tax dist (y/n): \_  
incorporated place: NORTH ANDOVER  
county subdivision:  
assess district 1:  
assess district 2:  
permits required:

committed date: target date: start date: 07/31/20  
duration: 4:00 num in crew: 2 manhours: 8.0  
dpi ref #: leak grade: mult facility (y/n): N  
scheduling: 20

CUSTOMER BUSINESS PHONE: ( ) -  
MET INFO: LOC CD: 02 NUMBER: Q06608 KIND-SIZE: 210  
REG INFO: TYPE: NUM INSTLD: 0 INSPECTION:  
LOC INFO: SUBDIV: LOT NUM:  
PLMBR: PHONE: (000)000-0000  
CNTRCTR: PHONE: (000)000-0000  
CURB BOX LOC: SL (SHORT/LONG):  
MAIN LOC: LOAD MCF: 000000 PIPE SZ: 000  
LE INFO: SIZE: 000000 AMT: 0000000.00 LENGTH: 000000



REDACTED

jo num: 20-8311127-00 loc num: 8400 supervisor: 8410P PAGE: 02 of 03  
job type: 2313 job summary: MVI RETEST SERVICE LINES specific budget:  
\*\*\*\*\* EXECUTION \*\*\*\*\*  
remarks: \_\_\_\_\_

line markers and signs inspected (y/n): \_\_\_\_\_  
facility failures (y/n): \_\_\_\_\_ damages by others (y/n): \_\_\_\_\_  
damages to others (y/n): \_\_\_\_\_ map corrections (y/n): \_\_\_\_\_

\*\*\*\*\* CHARGE TO INFORMATION \*\*\*\*\*  
80-0384000-0384000-00080-02313- -89200000:100%

: \_\_\_\_\_%

\*\*\*\*\* FURTHER ACTION REQUIRED \*\*\*\*\*  
job type: \_\_\_\_\_ job summary: \_\_\_\_\_  
remarks: \_\_\_\_\_

\*\*\*\*\* ATTACHMENTS \*\*\*\*\*  
detail: contracts: materials: X execute detail:  
pipe exposure: X facility: f.a.r.: X sketch: \_\_\_\_\_

I HAVE COMPLETED THIS JOB ORDER IN COMPLIANCE WITH ALL APPLICABLE POLICIES AND PROCEDURES. Bob Forester (COMPANY REPRESENTATIVE) 09-09-20-20

\*\*\*\*\* MATERIALS \*\*\*\*\*  
----- quantity -----

stock description	uom	est	net	ord	truck	inst	lost	trans	trans to/from

\*\*\*\*\* SOD AND PAVING \*\*\*\*\*

surface broken by: \_\_\_\_\_ date broken: \_\_\_\_\_ 1  
surface broken: \_\_\_\_\_ ft from: \_\_\_\_\_  
and: \_\_\_\_\_ ft from: \_\_\_\_\_  
type broken: \_\_\_\_\_  
size of opening: \_\_\_\_\_ X \_\_\_\_\_  
depth inches: \_\_\_\_\_  
surface as found: \_\_\_\_\_  
surface as left: \_\_\_\_\_  
authorized repair size: \_\_\_\_\_ X \_\_\_\_\_ completed (y/n) \_\_\_\_\_ (no f.a.r.)  
authorized repair surface: \_\_\_\_\_  
actual repair size: \_\_\_\_\_ X \_\_\_\_\_  
actual repair kind: \_\_\_\_\_  
repaired/completed by: \_\_\_\_\_ contractor name: \_\_\_\_\_  
charge : \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_%  
to jo#s \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_%  
\_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_% \_\_\_\_\_ : \_\_\_\_\_%



REDACTED

jo num: 20-8311127-00 loc num: 8400 supervisor: 8410P PAGE: 03 of 03

job type: 2313 job summary: MVI RETEST SERVICE LINES specific budget:

\*\*\*\*\* S O D A N D P A V I N G \*\*\*\*\*

surface broken by: \_\_\_\_\_ date broken: \_\_\_\_\_ 2

surface broken: \_\_\_\_\_ ft from: \_\_\_\_\_

and: \_\_\_\_\_ ft from: \_\_\_\_\_

type broken: \_\_\_\_\_

size of opening: \_\_\_\_\_ X \_\_\_\_\_

depth inches: \_\_\_\_\_

surface as found: \_\_\_\_\_

surface as left: \_\_\_\_\_

authorized repair size: \_\_\_\_\_ X \_\_\_\_\_ completed (y/n) \_\_\_\_\_ (no f.a.r.)

authorized repair surface: \_\_\_\_\_

actual repair size: \_\_\_\_\_ X \_\_\_\_\_

actual repair kind: \_\_\_\_\_

repaired/completed by: \_\_\_\_\_ contractor name: \_\_\_\_\_

charge : \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %

to jo#s \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %

\_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ % \_\_\_\_\_ : \_\_\_\_\_ %

\*\*\*\*\* P I P E E X P O S U R E \*\*\*\*\*

located at: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

county: \_\_\_\_\_ city: \_\_\_\_\_ map num: \_\_\_\_\_

begin street num: \_\_\_\_\_ end street num: \_\_\_\_\_

between: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

and: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

exposure type: \_\_\_\_\_

material: \_\_\_\_\_ pipe cond: \_\_\_\_\_ corrosion: \_\_\_\_\_ pits code: \_\_\_\_\_ intrnl corr: \_\_\_\_\_

ctg cond: \_\_\_\_\_ ctg type: \_\_\_\_\_ ftg expsd: \_\_\_\_\_ depth cvr: \_\_\_\_\_ in mtl rmv: \_\_\_\_\_

year installed: \_\_\_\_\_ num existing clamps: \_\_\_\_\_ pipe size code: \_\_\_\_\_

corr contrl type: \_\_\_\_\_

num clamps installed: \_\_\_\_\_ number anodes installed: \_\_\_\_\_ op press: \_\_\_\_\_

pipe to soil reading: \_\_\_\_\_ volts surface cover: \_\_\_\_\_

----- existing service line data -----

operating pressure: \_\_\_\_\_ efv (y/n): \_\_\_\_\_ main number: \_\_\_\_\_

main size: 000 material: \_\_\_\_\_ main location: \_\_\_\_\_

length of service: \_\_\_\_\_ ft ft

service pipel: size: 000 material: \_\_\_\_\_ special condition: \_\_\_\_\_

service pipe2: size: 000 material: \_\_\_\_\_ repair kind: \_\_\_\_\_

install date: 00/00/00 00/00/00 repair date: 00/00/00 00/00/00

master tap code: \_\_\_\_\_ master tap location: \_\_\_\_\_

curb box location: \_\_\_\_\_ customer valve location: \_\_\_\_\_



REDACTED  
 COLUMBIA GAS DISTRIBUTION COMPANIES  
 WORK MANAGEMENT SYSTEM  
 METER MANIFOLD INFORMATION

for job order: 20-8311127-00      site id: 893233007

EXISTING METER MANIFOLD DATA

address		prem stat	mstr tap	meter no	kind size	mtr loc	bypass	flow lmtr	reg ins	correct?
147	WAVERLY RD	N	B	-	Q06608	21 02	N	—	—	—
147	WAVERLY RD	N	B	-	Q06608	21 02	N	—	—	—

ADDITIONAL METER MANIFOLD DATA

address		prem stat	mstr tap	meter no	kind size	mtr loc	bypass	flow lmtr	reg ins	correct?

COMMENTS

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