



WATERMAIN TIE-IN REQUEST FORM

*** To request a watermain tie-in, complete and submit ALL the documentation and email to waterdept@peachland.ca and engineering@peachland.ca a minimum of 72 hours (3 business days) in advance. Hot taps must be witnessed by District staff and scheduled as noted above. VALVES SHALL BE TURNED AND CAPS REMOVED BY A MEMBER OF THE DISTRICT'S WATER DEPARTMENT ONLY.***

Works that require a water shut-off and subsequent precautionary boil water notice (BWN) shall be scheduled for Monday or Tuesday, when possible, in order to have finalized bacteriological results and the BWN rescinded prior to the weekend.

Date Submitted: _____ Requested Date & Time for Tie-in: _____

Project: _____ Address: _____

Contractor Installing Main: _____

Contact Name: _____ Contact Phone: _____

PRE TIE-IN

Yes Attached

Flushing

Completed per AWWA and MMCD

Leakage & Pressure Test

Performed in accordance with AWWA and MMCD and satisfies requirements

Disinfection

Performed in accordance with AWWA and MMCD and satisfies requirements

Flushing to tanker truck or approved location

Neutralizing & Testing of Wastewater

Performed in accordance with MMCD

Confirm absence of disinfection chemical

_____ Specify quantity of dichlorination chemical used

Describe how water was neutralized and where approved discharge occurred

Bacteriological Tests

Chlorine residual: _____

Testing satisfies AWWA and IHA requirements

Other information required

Sketch or plan showing sections that were tested and tie-in location(s)

Confirm ALL test results are attached

Resident notification letter for shut down and precautionary BWN (if required) is attached. *Contractor to deliver to residents 48 hours in advance of shutoff after receiving District approval. District will provide distribution list.