

Water Main Certification:

Project Name _____
Municipality _____
Section Certified _____
Firm Submitting _____

FLUSHING

Date of completion of construction _____

Date of Initial Flushing _____

PRESSURE TEST (In accordance with AWWA C600)

Date of Test _____

Initial Pressure _____ psi

Pressure @ _____ hours _____ psi

DISINFECTION (In Accordance with AWWA C651)

Date of Disinfection _____

Date of Final Flushing _____

CERTIFICATION

I, _____, certify that the above water supply improvement was completed in conformance with approved plans, specifications and any approved amendments and was pressure tested and disinfected in accordance with the supplier of water's specifications with the above recorded results. The watermain is hereby ready for bacteriological testing.

(Signature) P.E. License No. _____ Date _____