SGN TPC – SERVICE CARD (NEW LAY)

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| **SGN Project Ref.** |  | **UIP Reference** |  |
| **Job Type** | Service New Connection | Service Alteration (*for the new laid section only*) | |
| **MPRN** |  | **Meter Serial No** |  |
| **Easting** |  | **Northing** |  |
| Address: | | | |

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| **Test 1 - Details** | | | | | | | | | |
| **Date Tested** |  | **Duration of Test** | | |  | | | **Competent Person** |  |
| **Start Time** |  | **End Time** | | |  | | | **Pay No. / Resource No** |  |
| **Pressure Test (M)** | 0.1 bar | 0.35 bar | | 3 bar | |  | | **Company** |  |
| **Allowable Pressure Loss = Nil** | | | **Pass (P) or (F)** | | | |  | **Job Role** |  |
| **Instrument Serial No. for 3 bar Tests** = | | | | | | | | **I can confirm that the pressure test and purge were completed in accordance with current procedures.**  Signed by Competent Person. | |

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| **Service Length** |  | | **Dual Service Indicator** | Y or N | | Left | Right |
| **Service Termination** | **SHA** Service Head Adaptor | **HET** House Entry Tee | | | **CE** Cellar Entry | | |
| **SMB** Surface Mounted Box | **CIB** Cavity Inset Box | | | **SCB** Semi-Concealed Box | | |
| **UNIB** Unibox | **FE** Factory Entry | | | **GEB** Garage Entry Bend | | |
| **CHE** Corbelled House Entry |  | | | | | |

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| **Service Span 1** | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Asset ID** *(SGN)* | | |  | | | | | | | | | | | **Length** *(Measured On Site)* | | | | | | | | |  | | | | |
| **Start Location** | | | Main | | Other Specify | | | | | | | **End Location** | | | | Meter | | | | | Other Specify | | | | | | |
| **Span 1 Pressure** | | | **LP** Low Pressure | | | | | | **MP** Medium Pressure | | | | | | | | **IP** Intermediate Press | | | | | | | **Flow Restrictor Y/N** | | | |
| **Diameter** | **16** | **20** | **25** | **32** | | **40** | **63** | | **75** | | | | **90** | | | | | **125** | | | | **180** | | | | | Other /specify |
| **& SDR** | **11 or17** | | **11 or17 or 21** | | | | **11 or17 or 21** | | | | | **11 or17 or 21** | | | | **11 or17 or 21** | | | | |
| **Material** | | | **FP** Flexible PE | | | | **GL** Galv. Steel | | | | **PE** Polyethylene | | | | **ST** Yellow Wrapped | | | | | | | **SS** Stainless Steel | | | | | |
| **Grade** | | | **-------** | | | | **L2** | | | **MX** Yellow or **HP** Striped (Profuse) or **HD** Orange | | | | | | | | | | | | | **L2** Steel | | | | |
| **Joint Type** | | | **EF** Electro-fusion | | | | **CO** Compression | | | | **BF** Butt fused | | | | **TH** Threaded | | | | | **MC** Mech. Coupling | | | | | | **WE** Welded | |
| **Pipe Orientation** | | | **HB** Horiz Below Grnd | | | | | **HA** Horiz Above Grnd | | | | | **HL** Horiz Lateral | | | | | | **VA** Vertical Above Grnd | | | | | | **VB** Vert Below Grd | | |
| **Method Laid** | | | **ID** Insert Dead | | | | | **GM** Ground Mole | | | | | **OC** Open Cut | | | | | | **AG** Above Grnd | | | | | | Other /specify | | |

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| **Insert Drawing / Photos** |
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| **Comments** |
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| **I certify that this is a true record of the work undertaken.**  **Team Leader Name:**  Signature:  Date Completed: | **Approved By**  **Team Manager Name:**  Signature:  Date Completed: |