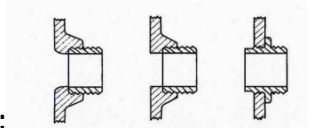


Hydrant Checklist

Location:	Hydrant No.
	Make & Model:
	Year of Manufacturing:
Secondary Valve Location: _____ . Distance from hydrant (ft): _____ .	Traffic Flange: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, is min. height above grade 3": Yes <input type="checkbox"/> No <input type="checkbox"/>
Main Valve Opening Size (in.):	Paint: O.K. <input type="checkbox"/> Repainting required <input type="checkbox"/> Bonnet and End Cap Colours: _____ .
Caps: Missing <input type="checkbox"/> Replaced <input type="checkbox"/> Greased <input type="checkbox"/>	Number of Turns to Open Hydrant:
Flushing Time (min: sec):	Main Valve Holds Tight Under Pressure: O.K. <input type="checkbox"/> Repair <input type="checkbox"/>
Leak Detection (when pressurized): O.K. <input type="checkbox"/> If leaking, location of the leak:	Secondary Valve Holds Tight: Yes <input type="checkbox"/> No <input type="checkbox"/>
Number of turns to Close Hydrant: _____ . Closure is Smooth: <input type="checkbox"/> Closure is Rough (Requires Maintenance): <input type="checkbox"/>	
Self Draining: Yes <input type="checkbox"/> If yes, drained before: O.K. <input type="checkbox"/> Plugged Drain Ports: Yes <input type="checkbox"/> If plugged, barrel stays filled when the hydrant is closed: OK <input type="checkbox"/> Repair <input type="checkbox"/> If plugged, pumped dry:	

Hydrant Checklist

Flow Test: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Pressure (psi): Static: Residual: Flow : End Cap Profile:	
	0.9 <input type="checkbox"/> 0.8 <input type="checkbox"/> 0.7 <input type="checkbox"/>
Flowrate (gpm): _____ .	
Flow Time (minutes:seconds): _____ .	
Hydrant Available for Use: Yes <input type="checkbox"/> No <input type="checkbox"/> (Bagged & Tagged)	
Any Other Defects / Repairs made / Repairs required / Comments:	
Inspection Date:	Defects Corrected Date:
Operators Name (Print):	Operators Name (Print):
Operators Signature:	Operators Signature: