UW-09B

PROJECT NAME: _____
CONTRACTOR: _____
WITNESS: _____
LINE PRESSURIZED: DATE: _____ TIME: _____ am / pm
LINE TESTED: DATE: _____ TIME: am / pm

$$L = \frac{SD\sqrt{P}}{148{,}000}$$

LEAKAGE FORMULA

L = Testing (leakage) allowance (makeup water), in gallons per hour = _____GPH
S = Length of pipe tested in feet = _____FEET
D = Nominal diameter of the pipe, in inches = _____INCHES
P = Average test pressure during the hydrostatic test, in pounds per square inch (gauge)_____PSI
*If multiple diameters of water main are being tested, separate leakage (L) calcaulation shall be added together.

NOTES AND CALCULATIONS

2-HOUR TEST

TOTAL ALLOWABLE LEAKAGE = L X 2 HOURS	_____GALLONS	A
INITIAL TEST PRESSURE (MINIMUM 150 PSI)	_____PSI	B
FINAL TEST PRESSURE	_____PSI	C
PASS (B-C<5 PSI) OR FAIL (B-C>5 PSI)		
MAKE UP VOLUME	_____GALLONS	D
PASS (A > D) OR FAIL (A < D)		E

LOCATION DIAGRAM AND SAMPLING MAP

INDICATE NORTH

Revised:
1.
2.
3.
4.

Drawing Name

WATER MAIN PRESSURE TEST AND CHLORINATION WORKSHEET

Drawing Number
UW-09B

Date: 07/23/2021

Drawn	Checked
KL	PW

City of Crystal Lake Illinois