UPF DRAINAGE/SEWER PIPE TEST REPORT

Work Package No.: _____

Task No.: _____

DMC NUMBER: **DATE:**

PROJECT NUMBER: **PROJECT NAME:** Uranium Processing Facility **FAC/BLDG/AREA:** UPF/

CONTRACT NUMBER: **CONTRACTOR NAME:** **TEST NUMBER:**

REFERENCE SPECIFICATION: **REV.:** **ALLOWABLE RATE OF HEAD LOSS:**

LINE FROM/TO	SIZE	SPEC	LENGTH	TIME OF TEST		HEAD OF WATER		RATE OF LOSS	ACCEPTABLE	
				START	END	LOW END	HIGH END		YES	NO
									☐	☐
									☐	☐
									☐	☐
									☐	☐
									☐	☐
									☐	☐
									☐	☐
									☐	☐
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									☐	☐
									☐	☐

UPF CONST. REP.
(Print/Sign)**:** **DATE:**

QC ENGINEER
(Print/Sign)**:** **DATE:**