

WATER SHUTDOWN PROCEDURE



PREPARATION

- Setting Shutdown Time
- Forward Planning to minimize inconvenience to customers
- On-site Investigation, prepare shutdown diagram



APPLICATION

Water Shutdown Request Form submitted to the Services Engineer with a Shutdown Diagram, at least three (3) days prior to the shutdown day or seven (7) days prior to the shutdown day for shutdown affecting large areas.



APPROVAL BY OTOROHANGA DISTRICT COUNCIL

Confirmation from Services Engineer / arrange advertisement (for large areas) or advise Contractor to distribute Shutdown Cards.



ADVISE CUSTOMERS

Contractor to advise affected customers (with Shutdown Card) 24 or 48 hours prior to commencement of the shutdown.



COMMENCING SHUTDOWN

- Notify the Services Engineer;
- Close valves bringing water into the effected area;
- Draw off the water by opening a hydrant within the closed down area;
- Carry out the repair or the required work;
- Answer general public queries;
- Disinfect the closed down area;
- Feed water into the closed down area by opening the valve at live end;
- Flush out the closed down area through an open hydrant;
- Close off hydrant to leave the effected area fully charged with water;
- Notify and explain to the Services Engineer for any time overrun;
- Notify the Services Engineer after the valves are turned back on;
- Complete As Builts and submit with Completion Form to Services Engineer.

WATER SHUTDOWN REQUEST FORM



CONTRACTOR TO COMPLETE

Company: _____

Name: _____ Date: _____

DETAILS OF SHUTDOWN

Date of Shutdown: _____

Time: 10.00am to 12:00pm OR 1:00pm to 3:00pm

Location (area affected): _____

Reason for Shutdown: _____

Are new lines tested and disinfected to ODC approval: Yes No N/A

Number of valves affected: _____

Valves have been checked for access and operation by: _____

Shutdown cards to be delivered by: _____

Delivery date: _____

Contractor's Supervisor: _____

Phone No: _____

(Attach plan detailing mains and valves affected)

ODC TO COMPLETE

Highlighted plan showing mains and services to be affected: Yes No

Approved Contractor & contact details provided: Yes No

Shutdown approved by: (Services Engineer) _____

Comments/areas requiring special attention: _____

Time and date approved: _____

Shutdown card required: 24 / 48 hours notice (select 1)

Public notification requirements: _____

APPROVED SHUTDOWN FORM TO BE FAXED TO CONTRACTOR PRIOR TO SHUTDOWN

**CONTRACTOR TO COMPLETE AT CONCLUSION OF SHUTDOWN
AND RETURN TO ODC SERVICES ENGINEER**

Shutdown completed within agreed timeframe? _____

Difficulties experienced: _____

Follow-up actions required: _____

As-builts of new works completed:

Yes

No

Signed:

Date:
