# 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: __________________________________________________

_____________________________________________________________________

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_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Follow-up actions required: ______________________________________________

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_____________________________________________________________________

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_____________________________________________________________________

_____________________________________________________________________

As-buils of new works completed: Yes ☐ No ☐

Signed: _________________________________

Date: _________________________________