## WATER PIPELINE ACCEPTANCE TESTING RESULTS SHEET



## HYDROSTATIC PRESSURE TESTING OF NEW MAINS - 15 MINUTE NO LOSS TEST

| GW Reference Number:              |  |
|-----------------------------------|--|
| Street(s) / Section / Estate:     |  |
| Town:                             |  |
| Contractor:                       |  |
| Contractor's Responsible Officer: |  |
| Witnessed By:                     |  |
| Date construction completed:      |  |
| Date of test:                     |  |

## Notes:

- 1. All new water mains shall be tested in accordance with:
  - WSA 03-2011-3.1 MRWA Edition, Section 19.4 'Hydrostatic Pressure Testing'
  - MRWA water supply calculator Version 1.9
- 2. Where the code specifies a 5-hour PE pressure test is required, it is acceptable to first attempt a 15 min No Loss test. A full 5-hour PE test would then be required if the 15 Min No Loss test is unsuccessful.
- 3. Test sections shall be no greater than 1000m in length.
- 4. Five working days' notice to the responsible officer is required before any acceptance testing.
- 5. Completed test result sheets to be submitted to Gippsland Water Responsible Officer or Gippsland Water Accredited Design Consultant with the as-constructed information.
- 6. All testing must be witnessed by one of either the Design Consultant, a Gippsland Water Officer or an independent auditor as authorised by Gippsland Water. Failure to do so will require retesting to be carried out at the contractor's expense.

| Gauge No. | Serial Number | Calibration Report No: | Calibration Date: | Calibration Due: |
|-----------|---------------|------------------------|-------------------|------------------|
| Gauge 1   |               |                        |                   |                  |
| Gauge 2   |               |                        |                   |                  |

| Street/section | Nominal Pipe<br>Diameter (mm) | Length of section (m) | System Test<br>Pressure (kPa) | Test time<br>(min) | Pressure<br>Drop (kPa) | Test Pass (Y / N) |
|----------------|-------------------------------|-----------------------|-------------------------------|--------------------|------------------------|-------------------|
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |
|                |                               |                       |                               |                    |                        |                   |

| Consultant Signature: | Date: |  |
|-----------------------|-------|--|
| Contractor Signature: | Date: |  |