

BEEHOOGHAN (AZ-12-176 KAIBETO) NHA HOUSING EMERGENCY WATER  
LINE INTERTIE NHA WATERLINE SYSTEM TO NTUA 4" WATERLINE AT  
BEEHOOGHAN NHA HOUSING



Tab 1

**IN THIS SECTION:**

- WATER PRESSURE TEST  
CERTIFICATION
- TEST RESULTS
- BACTI TEST
- BACTI TEST II

# PRESSURE TEST DATA SHEET

Date: 12-24-19

Page \_\_\_\_ of \_\_\_\_

Gage's Manufacturer Name and Model Number (2 required): 1. RVS 0-300 PSI

2. RVS 0-300 PSI

Conducted by: Jeremiah Notchman 6184  
(contractor/NECA representative)

Observed by: [Signature] TCNTUA  
(NTUA/IHS representative)

Test Section Line Designation (Sta. to Sta.)	Pipe Pressure Rating (psi)	Test Pressure at Pump (psi)	Gage Response Check (✓)	Observed Test Pressure Range at Pump (psi)	Total Leakage (gallons/2 hr)	Allowable Leakage (gallons/2 hr)
NHA inter tie site.	160 PSI	160 PSI	✓	160 PSI Start: 10:00 AM Finish: 12:00 PM  PASSED!	0	0.04

Highest Point in Elevation = \_\_\_\_\_ Lowest Point in Elevation = \_\_\_\_\_ Test Pump Elevation = \_\_\_\_\_

Description of Test Pump Location EOL injection point.

Differential in Elevation from Highest Point to Lowest Point = \_\_\_\_\_ feet x 0.433 = \_\_\_\_\_ psi

Differential in Elevation from Pump Location to Lowest Point = \_\_\_\_\_ feet x 0.433 = \_\_\_\_\_ psi (A)

Test Pressure at Pump = 160 psi - \_\_\_\_\_ psi = \_\_\_\_\_ psi  
(pipe press rating) (A) (test press at pump)

$$Q = (N \cdot D \cdot P^{3/2}) + 7400$$

Where:  
Q = Allowable leakage  
N = Number of Joints of Pipes Being Tested  
D = Nominal Pipe Diameter in Inches  
P = Pipe Pressure Rating

For 6" inch (PVC/PE/DI)  $Q = [( 2 ) \cdot ( 6 ) \cdot ( 160 )] + 7400 =$  \_\_\_\_\_ gal/hr

For \_\_\_\_\_ inch (PVC/PE/DI)  $Q = [( 2 ) \cdot ( 6 ) \cdot ( 12.64 )] + 7400 =$  0.02 gal/hr

For \_\_\_\_\_ inch (PVC/PE/DI)  $Q = [( ) \cdot ( ) \cdot ( )] + 7400 =$  \_\_\_\_\_ gal/hr

SUM TOTAL = \_\_\_\_\_ gal/hr

TOTAL ALLOWABLE LEAKAGE FOR TEST SECTION = SUM TOTAL X 2 = 0.04 gal/2 hrs



## Backflow Prevention Device Test and Maintenance Form

Facility Information	Protection Information
Facility Name: <u>Kaibeto NHA</u>	Manufacturer: <u>WILKINS</u>
Address: _____	Size: <u>4"</u>
City: <u>Kaibeto</u> St: <u>AZ</u> Zip: _____	Model: <u>375</u>
Phone: _____	Serial Number: <u>L125843</u>

Test Information		
Test Date: <u>12/31/2019</u>	Tester: <u>Timothy Toledo</u>	Test Kit SN: <u>11082299</u>

	Reduced Pressure Assembly			PVB / SVB	AVB
	Double Check Assembly		Relief Valve		
	Check Valve #1	Check Valve #2			
Initial Test	Held At (psid) <u>10.6</u> Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held At (psid) <u>4.6</u> Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened At <u>3.0</u> Did Not Open <input type="checkbox"/> Buffer (CV#1-RV) _____	Air Inlet Opened At _____ Did Not Open <input type="checkbox"/> Check Valve Held At _____ Leaked <input type="checkbox"/>	Air Inlet Closes when water flows Opens when no water flows <input type="checkbox"/> Height above outlets (in.) _____ Physical Condition: _____
Repair	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	
Give Detail Here					
Final Test	Held At (psid) <u>10.6</u> Closed Tight <input checked="" type="checkbox"/>	Held At (psid) <u>4.6</u> Closed Tight <input checked="" type="checkbox"/>	Opened At <u>3.0</u> Buffer (CV#1-RV) <u>7.6</u>	Air Inlet Opened At _____ Check Valve Held At _____	Air Gap Pass <input type="checkbox"/> Fail <input type="checkbox"/>

Comments: APP Reading - 8.6 PSI - 38 (NECA open 4" incoming Gate valve to pressurize Assembly. The Assembly kept discharging Ice due to very low freezing Temp. Waited until all Ice discharge and the discharge valve was able to close. Now it was able to test Assembly.

Test Result Passed

Tester Information	
Tester Name: <u>Timothy Toledo</u>	Certification No: <u>3-2592</u>
Phone: <u>(928) 729-5721</u>	Signature: <u>Timothy Toledo</u>
I certify that all information on this test is true and correct	

NAVAJO ENGINEERING & CONSTRUCTION AUTHORITY



P.O. BOX 969

SHIPROCK, NEW MEXICO 87420

PHONE: (505) 368-5151

TO: Navajo Tribal Utility Authority

POST OFFICE BOX 170

Fort Defiance, Arizona 86504-0170

LETTER OF TRANSMITTAL

DATE 26 DEC 2019

JOB NO. RWO 4485749

ATTENTION: RONALD BEGAY

RE:

EMERGENCY WATERLINE INTER-TIE AT

BEEHOOGHAN NHA HOUSING; KAIBETO, AZ

NECA PROJ. NO. 819141 - KAIBETO INTER-TIE

GENTLEMEN:

WE ARE SENDING YOU

☒ ATTACHED ☐ UNDER

Separate cover via \_\_\_\_\_ THE FOLLOWING ITEMS:

☐ SHOP DRAWINGS

☐ PRINTS

☐ PLANS

☐ SAMPLES

☐ SPECIFICATIONS

☐ COPY OF LETTER

☐ CHANGE ORDER

☒ OTHER - DRINKING WATER ANALYSIS REPORT

COPIES	DATE	NO.	DESCRIPTION
1	08-14-2019		

THESE ARE TRANSMITTED As checked below:

☐ FOR APPROVAL

☐ APPROVED AS SUBMITTED

☐ RESUBMIT \_\_\_\_\_ COPIES FOR APPROVAL

☒ FOR YOUR USE

☐ APPROVED AS NOTED

☐ SUBMIT \_\_\_\_\_ COPIES FOR DISTRIBUTION

☒ AS REQUESTED

☐ RETURNED FOR CORRECTIONS

☐ RESUBMIT \_\_\_\_\_ CORRECTED PRINTS

☐ FOR REVIEW AND COMMENT

☐ FOR YOUR SIGNATURE \_\_\_\_\_

Remarks:

Bacti Sample Testing Report.

PLEASE SIGN, DATE, AND RETURN THE YELLOW COPY.

RECEIVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

COPY TO: NTUA (RB, AT, DS, DS, JD, EH)

NECA (PM, GL, WB, BG, FS, JJ, AB)

SIGNED: \_\_\_\_\_

REVIEWED

By Ammerson Barber at 8:34 am, Dec 26, 2019

IF ENCLOSURES ARE NOT AS NOTED, KINDLY NOTIFY US AT ONCE

**Arizona Department of Environmental Quality  
Revised Total Coliform Rule Distribution System Monitoring  
Drinking Water Microbiological Analysis Report**

PWS ID Number:	PWS Name: <u>KAIBETO NHA INTERDIE</u>
Sample Date: <u>12-23-19</u>	Owner / Contact Person: <u>GENE LAUGHLEN</u>
Sample Time (24-hr. clock): <u>10:40 AM</u>	Phone Number: <u>(505) 879-5285</u>
	Email Address: <u>GENE@NAVAJO.NET</u>

☐ Special Purpose Sample for state information only (NOT FOR COMPLIANCE)

**Repeat Samples Only – Check One**  
**Use if Initial Sample was Positive**

Lab Specimen ID # of Initial Sample

- ☐ Original Location (Distribution System)  
☐ Upstream Location (Distribution System)  
☐ Downstream Location (Distribution System)  
☐ Dual Purpose Sample Taken at Well  
 (raw water) Must have regulatory agency approval

Well 55- \_\_\_\_\_ Cl<sub>2</sub> \_\_\_\_\_ mg/L (Not for MRDL reporting)

Location ID:

Ex. RTCR001

Sampling Site/ Tap Location:

KAIBETO NHA INTERDIE  
KAIBETO AZ.  
 Ex. 1234 Main St. tap

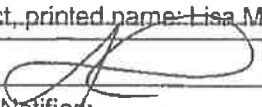
**Microbiological Analysis (To be filled out by lab personnel)**

Lab Specimen ID	3100 Total Coliform		3014 E. coli		Analysis Start		Analysis Complete	
	Method	Result	Method	Result	Date	Time	Date	Time
<u>19-1709</u>	<u>9223B</u>	<u>A</u>	<u>9223B</u>		<u>12/23/19</u>	<u>1400</u>	<u>12/24/19</u>	<u>1111</u>

If reporting for Ground Water Rule, Dual Purpose (raw water sample), must use method that provides E. coli as a result, and specify is E. Coli if detected.

**In the case of any E. coli detect, contact your RTCR ADEQ contact by the end of the business day (5pm)**

**Laboratory Information (To be filled out by lab personnel)**

Lab Name: <u>Nortest Analytical</u>	Lab Certified ID Number: <u>AZ0420</u>
Lab Contact, printed name: <u>Lisa Macario</u>	Lab Phone Number: <u>928-774-2312</u>
Signature: 	
Date PWS Notified: _____	PWS Person Notified: _____
<b>Any positive routine or increased routine RTCR sample triggers the GWR and requires ADEQ notification.</b>	
Date ADEQ Notified: _____	ADEQ Person Notified: _____

Comments:

C18

Please mail completed form to:  
 Arizona Department of Environmental Quality  
 Water Quality Data Unit, 5415B-1  
 1110 West Washington Street  
 Phoenix, AZ 85007

OR Email to: WQD\_Compliance\_Data@azdeq.gov

**Revised Total Coliform Rule Questions:**

Call (800) 234-5677, ext. 771-9200  
 within AZ (602) 771-9200  
<http://www.azdeq.gov/environ/water/dw/rtcr.html>

Please do not submit multiple times.

Relinquished By: L. Lli Date/Time: 12/23/19 14:04 PM

Received By: 1404 Date/Time: 12/23/19

Temperature 1.2 °C

[Download as CSV](#)  
[View in Excel](#)  
[Return to Sample List](#)

BEEHOOGHAN (AZ-12-176 KAIBETO) NHA HOUSING EMERGENCY  
WATER LINE INTERTIE NHA WATERLINE SYSTEM TO NTUA 4"  
WATERLINE AT BEEHOOGHAN NHA HOUSING



Tab 2

**IN THIS SECTION:**

- WASTEWATER MAIN CERTIFICATION
- MANHOLE TEST CERTIFICATION
- TEST RESULTS NTUA APPROVED

**WASTEWATER MAIN CERTIFICATION**

NOT APPLICABLE

**MANHOLE TEST CERTIFICATION**

NOT APPLICABLE

**TEST RESULTS NTUA APPROVED**

NOT APPLICABLE



BEEHOOGHAN (AZ-12-176 KAIBETO) NHA HOUSING EMERGENCY WATER  
LINE INTERTIE NHA WATERLINE SYSTEM TO NTUA 4" WATERLINE AT  
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Tab 3

## IN THIS SECTION:

- EXECUTED TRANSFER AGREEMENT
- COST OF PLANT



**UTILITY TRANSFER AGREEMENT  
WATER AND WASTEWATER FACILITIES**

This agreement is made between \_\_\_\_\_, hereinafter called the Grantor and the **NAVAJO TRIBAL UTILITY AUTHORITY**, hereinafter called the Grantee.

**WHEREAS**, the Grantor has constructed or caused to have constructed water and wastewater facilities located at or near \_\_\_\_\_ as shown on the plans titled \_\_\_\_\_, designed by \_\_\_\_\_, and dated \_\_\_\_\_ and said facilities and related final as-built plans already have been inspected, accepted and approved by the Grantee, and;

**WHEREAS**, the Grantor wishes to convey to the Grantee all his interest in these facilities and appurtenances constructed at the above-mentioned location on or about the above-mentioned time, along with all rights, rights of way, and privileges so that the Grantee may own, operate, and maintain all such facilities and appurtenances.

**NOW THEREFORE IT IS AGREED:**

For consideration of \$1.00 the receipt of which already has been acknowledged, the Grantor transfers, assigns, grants, and conveys to the Grantee all rights, titles, interests, easements, and rights of way in the aforementioned facilities, and;

The Grantee agrees to accept such aforementioned facilities, and further agrees to own, operate, and maintain such facilities in a reasonable and prudent manner until such facilities are determined to be no longer of any value.

Further, the Grantor hereby warrants all such facilities against defects in workmanship and materials, and for design deficiencies, errors and omissions for the period of one year beginning on \_\_\_\_\_ and ending on \_\_\_\_\_.

A listing of the total inventory and Cost of Plant determined by the Grantor to be transferred to the Grantee is attached as EXHIBIT \_\_\_\_\_ and made a part of this Utility Transfer Agreement. The total Cost of Plant as appears on this document is \$ \_\_\_\_\_.

**IN WITNESS THEREOF**, both parties have signed and dated this agreement.

Grantor:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Print Name/Title

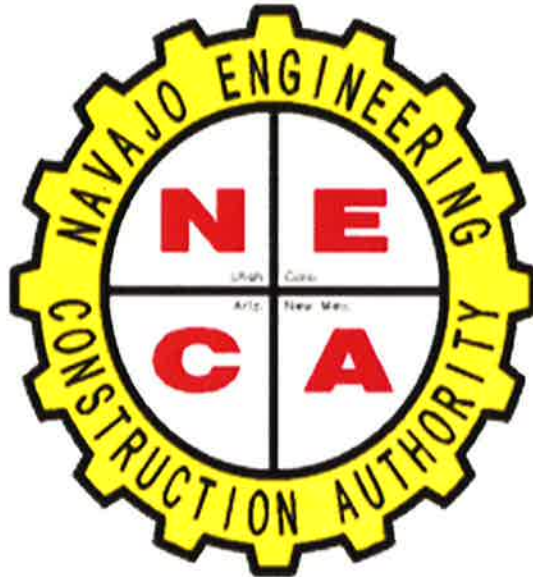
Navajo Tribal Utility Authority:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name/Title

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WATERLINE AT BEEHOOGHAN NHA HOUSING



**IN THIS SECTION:**

- WATER METER SERIAL  
NUMBER LISTING
- CURRENT WATER METER  
READINGS

Tab 4

WATER METER SERIAL NUMBER LISTING  
CURRENT METER READINGS  
Kaibeto, Coconino County, Arizona  
Beehooghan (AZ-12-176-Kaibeto) NHA Housing Emergency Waterline Inter-Tie  
NTUA PO No. 4500078174  
RWO 4485749

Water Meter Serial Number 16040435

Current Meter Reading 0

Water Meter Serial Number

Current Meter Reading

Meter Reading Taken By Jimmy Dgal

Agency T/C NTUA

Date: 02/27/2020

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## IN THIS SECTION:

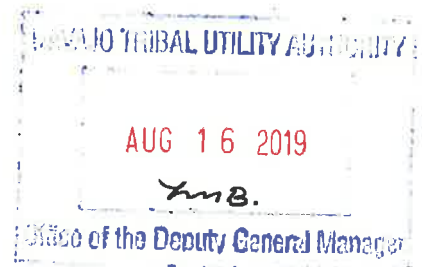
- APPROVED TAPPING PERMIT

Tab 5

NAVAJO TRIBAL UTILITY AUTHORITY

PERMISSION TO TAP

WATER & WASTEWATER FACILITIES



District: Tuba City

Project Name: Kaibeto Inter-tie

Project Description: Intertie to NHA Housing Development for NTUA

Location: Kaibeto, Coconino County, Arizona

Residential ☐      Commercial ☒      Industrial ☐



**PERMISSION TO TAP  
EXISTING N.T.U.A. WATER / WASTEWATER LINE**

This packet is for submitting Permission to Tap an existing NTUA Water / Wastewater Line for new or upgraded services. **PLEASE PRINT CLEARLY.**

OK DAY

**1. Customer/Owner**

Name: Navajo Engineering & Construction Auth.	Facility Name:
Title:	Organization:
Permanent Address: <b>1 Uranium BLVD</b>	Local Address: <b>Kaibeto, Arizona</b>
<b>Shiprock, New Mexico 87420</b>	
Telephone #: 505-210-7070	Local Phone #: 928-612-2032
c. Vicinity/location of Tap <b>Beehooghan NHA Housing Kaibeto, Arizona</b>	

**2. Person/Contractor Responsible for Tap**

**3. Engineer Responsible for Design**

Name: Patrick Martinez	Name: Adrian Showalter
Title: Superintendent	Title: Engineering Technician
Organization: Navajo Eng. & Const. Auth.	Organization: Navajo Tribal Utility Authority
Address: <b>1 Uranium Blvd. Shiprock, NM 87420</b>	Address: <b>PO Box 170</b>
<b>PO Box 969 Shiprock, NM 87420</b>	<b>Fort Defiance, Arizona 86504-0170</b>
Telephone #: 928-612-2032	Telephone #: 928-729-2340

**4. Customer/Owner Responsible for Payment to NTUA for Water/Wastewater Service(s).**

OK DAY

Name: Navajo Engineering & Const. Auth.	Telephone #: 505-210-7070
Title:	Organization:
Address: <b>PO Box 969 Shiprock, New Mexico 87420</b>	
<b>1 Uranium BLVD Shiprock, New Mexico 87420</b>	

**5. Customer Submitting Tap Request**

**6. Received at NTUA by:**

Date: 01 AUG 2019	Name: <i>Tuba City NTUA</i>
Name: Patrick Martinez	Title: <i>W/WW Dept.</i>
Telephone #: 928-612-2032	NTUA Office: <i>Tuba City District</i>

7. Drawings, Specifications and Location Map of proposed construction attached? No (Yes / No).

8. Type of Services Requested by Customer:

☐ Residential

☒ Commercial

☐ Industrial

Length of Service: ☒ Permanent Service ☐ Temporary Service

METER SIZE :

Type of Building Served:

Number of Water Connections:

Number of Wastewater Connections:

New Water/Wastewater Facilities as part of the service connection

	On-Site	Off-Site		On-Site	Off-Site
Water main	✓		Gravity Sewer Main	✓	
Water Service Line	✓		Sewer Service Line	✓	
Well		✓	Force Main		
Chlorination		✓	Lift Station		
Storage Tank		✓	Septic Tank		
Booster Station		✓	Drain field		
Backflow Protection	✓		Lagoon	✓	

9. Water Demand and Minimum Pressures Requested by Customer

DOMESTIC FLOW	UNITS	FIRE FLOWS	FIRE SPRINKLER	FIRE HYDRANT	UNITS
Normal	GPM	Quantity			GPM
Peak	GPM	Duration			MINS.
Pressure 20 min to 75 min	PSI	Static Pressure	NA		PSI
Elevation 0.15 + 50 ft TAP - TO HIGH Hm.	FT	Residual Pressure			PSI



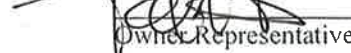
NTUA DOES NOT GUARANTEE FIRE PROTECTION FLOWS.

10. Customer Requested Date and Time of the actual tap construction:

Please schedule tap construction at least 3 days in advance with NTUA District office.

11. I agree to adhere to the Navajo Tribal Utility Authority (NTUA) requirements for the material standards, line test procedures, disinfections, water and wastewater construction methods and policies, As-built drawings, and the tariff, as they pertain to tapping the existing NTUA water and wastewater facilities for services provided by the NTUA; and the constructed utilities to be transferred to NTUA for operations and maintenance thereafter.



Owner Signature \_\_\_\_\_ Print Patricio Martinez Date 2/27/2020  
 Contractor Signature \_\_\_\_\_ Print Patricio Martinez Date 2/27/2020  
 Owner Representative Signature \_\_\_\_\_ Print Patricio Martinez Date 2/27/2020

### NTUA Review and Approvals

12. Is this service downstream from a previous Master Metered area? No (Yes/No).

13. Specifications and proposed construction drawings reviewed by:

NA per [Signature] 2/22/20 \_\_\_\_\_ Date  
 NTUA District Engineering Dept.

14. Specifications and proposed construction drawings reviewed and approved by:

[Signature] 8/2/19 \_\_\_\_\_ Date \*OCP? (Yes/No)  
 NTUA District W/WW Foreman

\* "OC/P" = Operational constraints/problems. If YES, attach list of operating problems.

15. Assigned NTUA inspector's name.

The Tulsa City water crew \_\_\_\_\_  
 NTUA Inspector's Name/Title

16. Reviewed By District Manager.

[Signature] for ALICIA RICHARDS 8/9/19 \_\_\_\_\_ Date  
 NTUA District Manager Signature

17. Approved time and date of construction of tap.

Time and Date: When scheduled with 3 days notice

18. Permission to Tap reviewed and approved by.

[Signature] NTUA ENG TECH 2/27/2020 \_\_\_\_\_ Date  
 NTUA HQ Civil Engineering Dept./Title

19. Comments / Remarks: