MIAMIBEACH
City of Miami Beach, 1700 Convention Center Drive, Miami Beach, Florida 33139, www.miamibeachfl.gov

PUBLIC WORKS DEPARTMENT
TEL: 305-673-7080, FAX: 305-673-7028

WATER MAIN/ SERVICES PRESSURE/ LEAKAGE TEST

Project:_____

Location:_____

Date: _____

W.O. # : _____

Crew Supervisor _____

Start Time: _____

Start Pressure: _____

End Time: _____

End Pressure: _____

Total Test Time: _____

Average Pressure: _____

Pipe Material: _____

Type of joints: _____

ALLOWABLE LEAKAGE / AWWA C 600-99

S = Length of pipe-Lin. Feet
D = Diameter of pipe-inches
P = Average test pressure psi.
L = Allowable leak (Gals/Hr.)
= SD √P / 133200

	Section 1	Section 2	Section 3	**Total**

Total Allowable leak (ozs.)
Amount of water used to maintain test pressure : _____ Gals. _____ Ozs.

TEST RESULTS: **PASSED** ☐ **FAILED** ☐

Remarks: _____

Approved by: _____ _____
Inspector Engineer

_____
Operations Supervisor