

FIRE LINE IMPROVEMENT PLANS

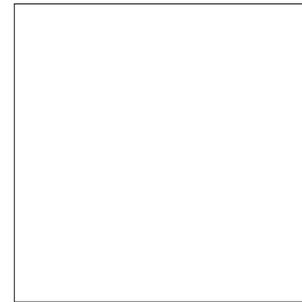
PLAN TYPE & PHASE/PARCEL No.

(Location, Street Address/Cross Roads)

Section, Township & Range

WATER	ON-SITE	UNIT	OFF-SITE	UNIT
FIRE LINE		LF		LF
FIRE HYDRANTS		EA		EA
TAPPING SLEEVE		EA		EA
MAIN LINE/LATERAL/FH VALVE		EA		EA

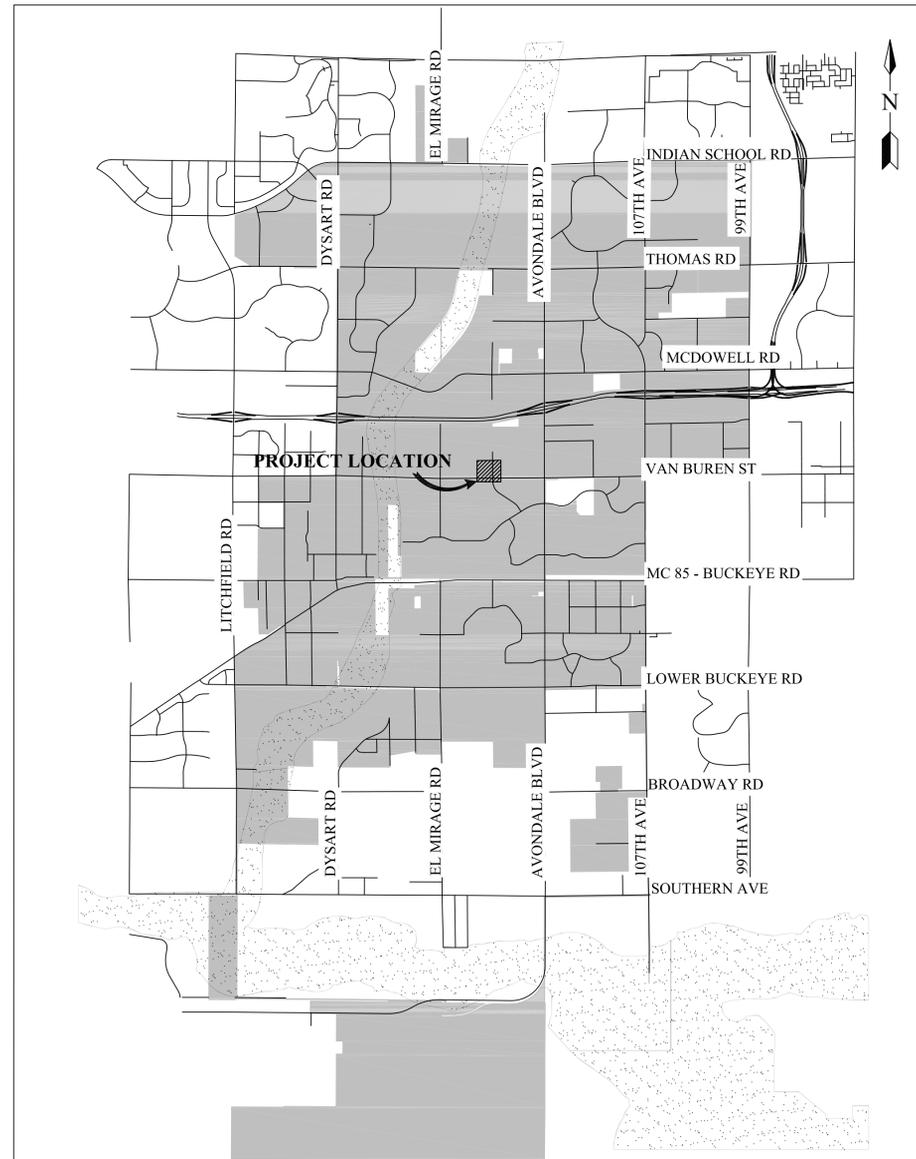
AREA MAP



VICINITY MAP

SHEET INDEX:

XXX
XXX



OWNER

Company
Contact Person
Address
City, State Zip
PHONE:
FAX:

ENGINEER

Company
Contact Person
Address
City, State Zip
PHONE:
FAX:

BENCHMARK:

BENCHMARK IS
INTERSECTION OF
ELEVATION
DATE SHOT:

CITY OF AVONDALE

MAYOR

MIKE PINEDA

VICE MAYOR

CURTIS NIELSON

CITY MANAGER

RON CORBIN

COUNCIL MEMBERS

MAX WHITE
GLORIA SOLORIO
SHARI WEISE

TINA CONDE
JEANETTE GARCIA

CITY CLERK

MARCELLA SARMIENTO

APPROVALS

REQUIRED FIRE FLOW _____ GPM

"AS-BUILT CERTIFICATION"

I HEREBY CERTIFY THAT THE "AS-BUILT" INFORMATION SHOWN HEREON WAS OBTAINED UNDER MY DIRECT SUPERVISION AND IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

REGISTERED LAND SURVEYOR _____

SEAL _____

REGISTRATION NUMBER _____

DATE _____

COMPANY NAME:

ADDRESS:

CITY/STATE/ZIP CODE:

PHONE NUMBER:

NOTE:

ALL CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE MOST RECENT EDITION OF THE CITY OF AVONDALE'S SUPPLEMENT TO THE M.A.G. SPECIFICATIONS AND STANDARD DETAILS CURRENTLY ON FILE AND AVAILABLE AT THE CITY OF AVONDALE'S ENGINEERING DEPARTMENT OR ONLINE AT THE CITY OF AVONDALE'S WEBSITE.



(FIRM INFORMATION HERE)

DATE/ISSUE: _____
NAME _____
PROJECT NAME _____
NAME _____
FIRE IMPROVEMENT PLANS

ORIGINAL PLAN DATE

LATEST REVISION DATE

SHEET NUMBER
OF

PROJECT NUMBER
XXXX