



**TOWN OF MEDWAY**  
**DEPARTMENT OF PUBLIC SERVICES**  
**MEDWAY, MASSACHUSETTS**

*Entrusted To  
Manage The  
Public  
Infrastructure*

## **Utility As-Built Form**

- By State Law, Dig-Safe must be contacted at least 72 business hours in advance of all non-emergency work in order to have all public utilities marked clearly. For all emergency work, Dig-Safe must be contacted within 2 hours of the start of work.
- **24-hour notice is required for inspections. Do not backfill until an inspection is performed on a service repair, or an inspection is performed on the entire new service. You will be asked to re-excavate for inspection if it's not visible.**
- Service connection to be shown on plan below with measurements.
- **This plan will be completed and submitted to the inspector at the time of inspection. If not complete you may be subject to penalties and fines.**

Service Address \_\_\_\_\_ Permit # \_\_\_\_\_

<p style="text-align: center;"><i>Include street location on diagram</i> <i>Include all measurements and ties to building</i></p> <div style="text-align: center; margin-top: 50px;"><div style="border: 1px solid black; width: 200px; height: 100px; margin: 0 auto;"></div><p><i>Building</i></p></div>	<p>Date Completed: _____</p> <p>Pipe Size _____ Inch</p> <p>(If more than one size, submit a detailed plan/drawing.)</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><p>Copper _____ Ft.</p><p>C.L.D.I. _____ Ft.</p><p>Plastic _____ Ft.</p><p><b>Total Length _____ Ft.</b></p></div> <p>Depth @ Bldg. _____ Ft.</p> <p>Depth @ Street _____ Ft.</p> <p>Fittings _____</p> <p>_____</p> <p>Slope of Pipe _____</p>
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Contractor Signature \_\_\_\_\_ Date \_\_\_\_\_

DPS Inspector Signature \_\_\_\_\_ Date \_\_\_\_\_