

## VALVE INSPECTION REPORT

### INSPECT & OPERATE CRITICAL TRUNK VALVE

<b>Job Task:</b>	To locate, inspect and report on the valve on each item specified in the inspection form. To take photos and reference photo numbers in the inspection form. To ensure all requirements to undertake the inspection are in place (traffic control, permits, shut plans, confined space, and pump out the valve pit if required). To provide comments on any maintenance required and any further detail on the condition of the valve. If GIS valve location, attributes or status is incorrect, to provide detailed marked up maps and correct information to QUU redlining.
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<b>Plant Number</b>		<b>Work Order</b>	
<b>Valve Size</b>	mm	<b>Main Size</b>	mm
<b>Valve Type</b>		<b>Manufacture Type/ Year</b>	
<b>GPS Latitude/ longitude</b>		<b>Trunk Main Set Number &amp; Name</b>	
<b>Address</b>			

VALVE Found?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Indicator post?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Location</b>	<input type="checkbox"/> Road	<input type="checkbox"/> Footpath / Verge	<input type="checkbox"/> Private property	<input type="checkbox"/> Driveway	
	<input type="checkbox"/> Easement	<input type="checkbox"/> Reserve / Park	<input type="checkbox"/> Adjacent to Waterway	<input type="checkbox"/> Other _____	
<b>Access</b>	<input type="checkbox"/> Vehicular	<input type="checkbox"/> Pedestrian	<input type="checkbox"/> No Access	<input type="checkbox"/> Other _____	
	<input type="checkbox"/> In pit	<input type="checkbox"/> Yellow Road	<input type="checkbox"/> Traffic Control	<input type="checkbox"/> Confined Space	

ITEM	TICK		ACTION TAKEN	FURTHER ACTION REQUESTS COMMENTS
	YES	NO		
1 PRELIMINARY				
1.1 Asset Number (if applicable) - Clearly marked				
1.2 Operating Equipment				
- Clear access				
- Secure from vandalism				
1.3 Gearing (if fitted)				
- Free in bearings				
- Greasing nipple				
- Worn bearing				
- Broken teeth				
- Correct meshing				

ITEM	TICK		ACTION TAKEN	FURTHER ACTION REQUESTS COMMENTS
	YES	NO		
- Crown wheel C.I.				
Steel _____ mm OD				
Size _____ teeth				
No. teeth				
- Crown wheel ID/ spindle OD				
- Pinion C.I.				
Steel _____ mm OD				
Size _____ teeth				
No. teeth				
- Pinion ID/ pinion shaft OD				
<b>1.4 Spindle cap</b>				
- Size top base	_____ mm	_____ mm		
- Length of spindle cap taper : top base	_____ mm	_____ mm		
<b>1.5 Valve lengthening piece</b>				
- Type:				
- Welded?				
- Solid unit?				
- Length: Top of pit to top of spindle	_____ mm			
<b>1.6 Bolts</b>				
- No. & size body bolts _____ x _____ x _____ mm <b>Condition:</b> <input type="checkbox"/> Good <input type="checkbox"/> Poor				
- No. & size bonnet bolts _____ x _____ x _____ mm <b>Condition:</b> <input type="checkbox"/> Good <input type="checkbox"/> Poor				
- No. & size flange bolts _____ x _____ x _____ mm <b>Condition:</b> <input type="checkbox"/> Good <input type="checkbox"/> Poor				
<b>1.7 Position indicator</b> (if fitted)				
- Free to operate, visible				
<b>1.8 Access for operation</b>				
- Safe? What Issues				
<b>1.9 Chamber/Cubicle</b>				
- Access satisfactory				
- Steelwork (Ladders, Platforms, etc.)				
- Light/ Power (if applicable)				
<b>2 OPERATIONAL CHECK</b>				
<b>2.1 Exercise the valve</b>	Open	Close		
- Position when located				
- Direction to close	Clockwise	Anti-clockwise		

ITEM	TICK		ACTION TAKEN	FURTHER ACTION REQUESTS COMMENTS
	YES	NO		
- Turns operated / Total	____ / ____ Total			
- High Torque				
- Depth	_____mm			
<b>2.2 Operating Effort</b> - Satisfactory?				
<b>2.3 Method of Operation</b> No of persons needed/Size of turning bar				
- Portable Actuator				
<b>2.4 Leakage - Past Closed Valve</b> Measure and record if possible: Leakage				
	_____L/min			
- Noise apparent				
<b>2.5 Gland Leakage</b> - Before exercising / After exercising				
- Need Replacing				
- 50% or more adjust remaining?				
<b>3 CONDITION ASSESSMENT</b>				
<b>3.1 Gland Bolts</b> - Good condition?				
<b>3.2 Fasteners (including bonnet and flange bolts)</b> - Good condition?				
<b>3.3 Body</b> - Corrosion >20%				
- Paintwork Satisfactory				
<b>3.4 Pipe / Flanges – (Condition &amp; Corrosion)</b> - Bolts, Nuts & Washers				
- Satisfactory				
<b>3.5 Extension Spindles</b> - Satisfactory (If not, replace)				
<b>3.6 Lubrication of gears &amp; any greasing nipple</b>				
- Did you grease?				
- Any additional work performed?				

**Any Corrective Action?** – access, valve & associated equipment or structure: ☐ Yes ☐ No

**General Assessment & Comments**

*Describe the maintenance required (or any maintenance completed during the inspection).*

**Corrective work Priority:** **Low** ☐ **Medium** ☐ **High** ☐

**Shut plan required:** ☐ Yes ☐ No **AH work:** ☐ Yes ☐ No

**Traffic control requirement** – “yellow” road permit: ☐ Yes ☐ No **Police:** ☐ Yes ☐ No

**Pipework Condition Rating for sandblasting repairs (1-3):**

- ☐ **1 – Good condition (no pipework corrosion)**
- ☐ **2 – Fair condition (some corrosion on pipework – minor sanding & paint repair)**
- ☐ **3 –Poor condition (pipework very corroded - requires thickness test, sandblasting & repainting)**

**Recommendation** (further works and including assessment of remaining service life)

**Redlining required:** Maps detailed with correct location & attributes to be provided ☐ Yes ☐ No

Inspected by: Date:

## PHOTOS INSPECTION REPORT

Asset Information	Photo Numbers