

Performance Pipelining, Inc.

1779 Chessie Ln, Ottawa, IL 61350
Phone: (815) 433-0080 Fax: (815) 431-0307
Email: nodig@ppi-liner.com



Job Qualification Sheet For Permacast® Manhole Rehabilitation

GENERAL INFORMATION (SECTION - I)

Today's Date: _____
Contact Person: _____ Office Phone: _____ Ext. _____
Cell Phone: _____ Fax: _____

Business Name: _____
Business Address: _____
City: _____ State: _____ Zipcode: _____

Location of Project: _____
Address: _____
City: _____ State: _____ Zipcode: _____
Name the County where the Project is Located: _____

Is the street where the work is located classified as a state road or a county road? _____

Give a complete description of the problem & description of work that you are requesting:

Is there any active groundwater infiltration? If so, what are the levels?

***THE FOLLOWING SUBMITTALS ARE REQUIRED BEFORE A PROPOSAL CAN BE GENERATED. PLEASE PROVIDE ALL INFORMATION.**

1. Prior to any repair being made or crew being mobilized PPI® will need, city street map showing all manhole locations, manhole numbers, addresses where manholes are located and direction of flow.
 - a. Map must show the cross streets that are closest to the upstream and downstream manholes where our work is scheduled to be performed.
2. Job site drawings/diagrams – Must show things such as obstacles, backyard easements/fences, or anything else that may inhibit our access, personnel or equipment, etc.
3. Please include accurate, step by step directions to the job site location from the nearest interstate or main highway.

Does the client agree to provide water on site or be responsible for gaining permission to use a hydrant near by and if a meter is needed and/or a deposit for the meter is needed, the client shall provide the deposit and ensure the meter is onsite at the time of arrival for our crew & equipment? _____

Is there adequate space on the job site to safely park trucks, trailers, and equipment? _____

Will traffic control be a requirement to complete this project? _____

Indicate volume of traffic and traffic control needs: _____

Who will provide the traffic control? Performance Pipelining, Inc. or Client

If this is a multi-day job, can the client provide us with a SECURE place to park/store our equipment overnight, weekends, or holidays if applicable? _____

Specify the work hours and work day parameters that are not in violation of any local laws, codes, or ordinances. This includes: start of day, end of day, weekends, or holidays: _____

Date quote needed by? _____ Date project needs to be completed by? _____

Will by-passing the flow in this line segment be required in order to complete this repair? _____

NOTE: Each liner takes approximately 2 1/2 hrs to complete and the section in which we will be working will require us to block the flow.

If bypass pumping is required, who will do it? Performance Pipelining, Inc. or Client

What is the distance between the upstream and downstream manholes? _____

PLEASE NOTE: If multiple repairs are requested, then information for EACH repair must be given.

In order for Performance Pipelining, Inc. to provide an accurate and timely proposal, please ensure that our office receives ALL information on this form that pertains to the repair requested, including videos and/or supporting documentation. It is **IMPERATIVE** that the information provided is completely accurate since it will be used for generating the proposal for the work you are requesting. The proposal preparation includes the number of technicians needed, the type of equipment that will be mobilized to the job site and any special tools and/or materials that need to be utilized in order to complete the scope of work that is required for this project. The accuracy of this information is **ESSENTIAL**.

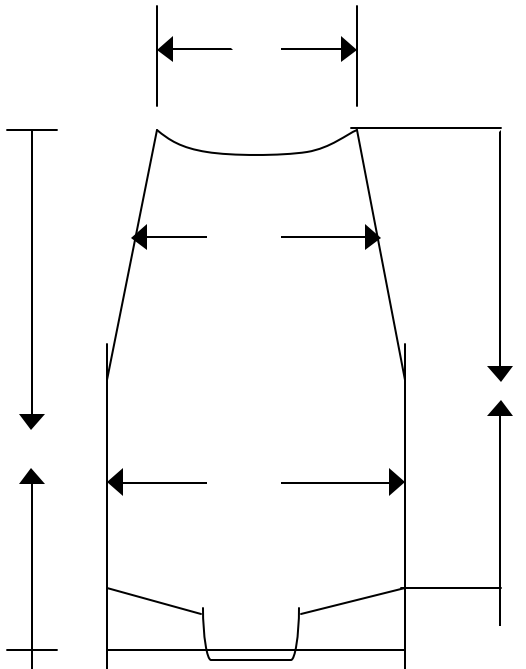
PLEASE NOTE: Additional charges to the client may be applied if the crew is mobilized and cannot complete the repair due to inaccurate information provided on this form. In addition, if ANY information is omitted PPI® will provide a quote based on a worst case scenario which may increase the cost of the project.

Verifying Signature
(Please print name and sign)

Date

Thank you for your cooperation,
Shaun M. Flanery, President
Performance Pipelining, Inc.

DIMENSIONS



Please indicate inside diameters (in inches) at points of significant diameter changes and corresponding depths (in feet).

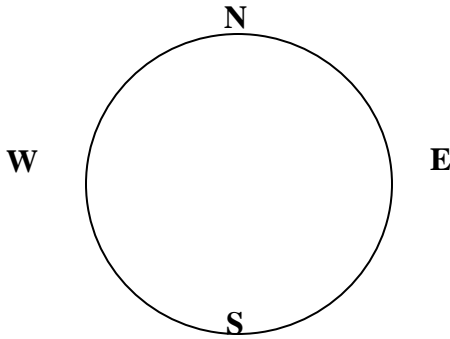


Diagram for Bench/Invert

(Draw and label all influent and effluent pipes with pipeline diameters)

_____ Verifying Signature & Date

1. Manhole Location: _____
 Address/Access Description: _____

2. Indicate volume of traffic & traffic control needs: _____

3. Casting Condition & Description: _____
4. Cone: Concentric ____ Eccentric ____ Straight ____
 a. Cone Condition & Description: _____

5. Chimney Condition & Description: _____

6. Barrel Condition & Description: _____

 a. Material: ____ Brick: ____ Block Pre-cast: ____
 b. Is Any Infiltration Present? _____

 c. Drop Inlets:

	#1	#2	#3	#4
Pipe Type:	_____	_____	_____	_____
Pipe Diameter:	_____	_____	_____	_____
Depth to Invert:	_____	_____	_____	_____
Direction From Inlet:	_____	_____	_____	_____
Condition/Description:	_____			
6. Bench Condition & Description: _____

 a. Corrosion/Hydrogen Sulphide: _____

8. Depth of Manhole from Mainline Invert to Casting: _____
 a. Influent Mainline:

	#1	#2
Diameter:	_____	_____
Direction of Flow:	_____	_____

 b. Effluent Mainline:

	#1	#2
Diameter:	_____	_____
Direction of Flow:	_____	_____

 c. Volume of Flow: _____
 d. Will By-Passing Be Required to Complete Repair: _____
9. Repair Recommendations: Permaform®, Permacast®, Ring-Seal, Corguard, Chemical Grout, Bench Repair, other: _____

10. Any additional comments/description: _____

