

Lead Service Line Project Plan Submittal Guide (No Plans and Specs)

Instructions: This form should be used if the project is not producing engineering plans and specifications for bidding. If plans and specifications are being prepared, please use the alternate form. Complete the information below. Provide the requested information or check the box if that item is included with the submittal. Send this completed form along with any other applicable information for review and approval to corey.mathisen@state.mn.us.

Project Information

DWRF Project Name: _____

DWRF Project Number: _____

Number of service lines to be replaced by this project: _____

List of addresses is included which shows services to be replaced (must include schools and childcares). Additional addresses proposed to be added to a project must be submitted to MDH for approval before construction.

Submitter Contact Information

Name: _____

Company: _____

Email: _____

Phone Number: _____

Project Specific Information

Template cross section/standard plate is included showing all components to be replaced.

PFA contract packet (including AIS/BABA requirements) will be required.

Date of PFA contract packet included (see cover page of packet for date): _____

Check the box describing the service line ownership:

Split ownership

All privately owned

All publicly owned

Describe the service line ownership (ex: system owns from the main to curb stop and resident owns from curb stop to meter):

Describe the construction method (ex: open cut, directional drill, etc.):

Describe restoration type needed (grounding rods, sanitary sewer impacts, reseeding excavation areas, etc.):

Describe the replacement material (ex: copper, plastic, etc.):

Describe the contracting method (ex: owner hired, utility hired, etc.):

Describe the contractor type (ex: private contractor, water system staff, etc.):

Project schedule

Advertise for bids: _____

Open bids: _____

Start construction: _____

Complete construction: _____

Prioritization Plan has been completed and submitted to MDH (if not submitted with original PPL submittal). See [Minnesota Session Law-Chapter 39](#) for additional information.

Yes Previously provided with PPL submittal

Workforce Plan has been submitted to MDH (if over 15,000 connections). See [Minnesota Session Law-Chapter 39](#) for additional information.

Yes Not required (less than 15,000 connections)

Licensed plumber is provided as required by plumbing code.

Map of the project area is included showing properties to be replaced.

All required environmental review forms have been submitted.

- [Environmental Review Cover Page \(PDF\)](http://www.health.state.mn.us/communities/environment/water/docs/dwrf/erecordcover.pdf)
(www.health.state.mn.us/communities/environment/water/docs/dwrf/erecordcover.pdf)
- [Environmental Review Exemption Checklist \(PDF\)](http://www.health.state.mn.us/communities/environment/water/docs/dwrf/erxemptcklist.pdf)
(www.health.state.mn.us/communities/environment/water/docs/dwrf/erxemptcklist.pdf)
- [Section 106 Exemption Checklist \(PDF\)](http://www.health.state.mn.us/communities/environment/water/docs/dwrf/erxemptcklist106.pdf)
(www.health.state.mn.us/communities/environment/water/docs/dwrf/erxemptcklist106.pdf)

DNR Master Supply Plan has been approved by DNR (required for systems serving > 1,000 people)

Yes Not required (less than 1,000 people)

Date of approval:

Contractor will be required to provide water pitcher filters meeting the following requirements:

- Each service line being replaced will be provided a pitcher filter within 24 hours of the replacement being completed.
- Filters will be provided for 6 months.
- Filters are certified to meet NSF/ANSI Standard 53.

Certification Statement

I hereby certify that this plan, specification, or report was prepared by me or under my direct supervision and that I am a duly Licensed Professional Engineer under the law of the state of Minnesota.

Signature _____

Typed or Printed Name _____

Date _____

License Number _____

Minnesota Department of Health
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www.health.state.mn.us

02/08/2024 | To obtain this information in a different format, call: 651-201-4700.