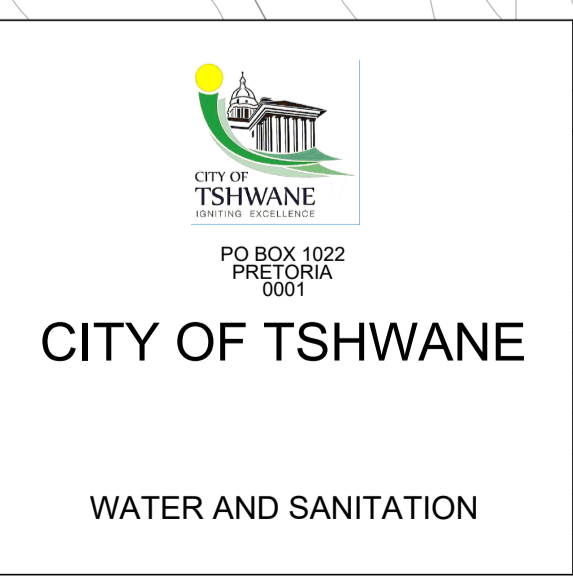


- GENERAL:**
1. ALL MATERIAL AND WORKMANSHIP MUST COMPLY WITH THE REQUIREMENTS OF THE LATEST RELEVANT SABS REQUIREMENTS.
 2. ALL DIMENSIONS ARE IN MILLIMETRES. (UNLESS OTHERWISE SPECIFIED)
 3. DO NOT SCALE FROM THESE DRAWINGS.
 4. ALL DIMENSIONS MUST BE CHECKED AND APPROVED ON SITE.
 5. ALL CONSTRUCTION TO BE DONE IN ACCORDANCE WITH THE STANDARD SPECIFICATIONS FOR MUNICIPAL CIVIL ENGINEERING WORKS, THIRD EDITION 2005 AND THE STANDARD COT DETAIL DRAWINGS.
 6. THESE DRAWINGS MUST BE READ IN CONJUNCTION WITH THE STANDARD SPECIFICATIONS FOR MUNICIPAL CIVIL ENGINEERING WORKS, SERIES 4.
 7. THE SIGNATURE OR INITIALS ON THIS DRAWING, OF ANY DIRECTOR OF THE PUBLIC WORKS AND INFRASTRUCTURE DEVELOPMENT DEPARTMENT, IN NO WAY REMOVES ANY RESPONSIBILITY WHATSOEVER FROM THE CONSULTANT.
 8. THE CONSULTANT REMAINS RESPONSIBLE TO ENSURE THAT ALL THE GUIDELINES, STANDARD DRAWINGS, STANDARDS AND SPECIFICATIONS OF THE PUBLIC WORKS AND INFRASTRUCTURE DEVELOPMENT DEPARTMENT HAVE BEEN MET AND ARE COMPLIED WITH.
 9. FINAL POSITION OF SERVICES TO BE DETERMINED ON SITE.

- LEGEND:**
- SITE BOUNDARY
 - - - EXISTING WATER
 - PROPOSED NEW 250mm WATER PIPE AND CONNECTION



| AMENDMENTS | | | |
|------------|------------|------------|---------------------|
| NR | DATE | APPROVED | DESCRIPTION |
| A | 01-03-2022 | W. STANDER | ISSUED FOR APPROVAL |
| B | 02-12-2022 | W. STANDER | UPDATED EXTENTS |

| WATER AND SANITATION | | | |
|---|----------------|-----------|------|
| FOR INTERNAL APPROVAL - RECEIVED SIGN WHEN APPLICABLE | | | |
| DIRECTOR: WATER AND SANITATION - PLANNING | | | |
| NAME | Prof. Reg. No. | SIGNATURE | DATE |
| REGIONAL DIRECTOR: (1,2,3,4,5,6 or 7) | | | |
| NAME | Prof. Reg. No. | SIGNATURE | DATE |
| DIRECTOR: SYSTEM DEVELOPMENT | | | |
| NAME | Prof. Reg. No. | SIGNATURE | DATE |
| DIRECTOR: BULK WATER | | | |
| NAME | Prof. Reg. No. | SIGNATURE | DATE |
| DIRECTOR: INFRASTRUCTURE PROVISION | | | |
| NAME | Prof. Reg. No. | SIGNATURE | DATE |
| DIRECTOR: WASTE WATER TREATMENT | | | |
| NAME | Prof. Reg. No. | SIGNATURE | DATE |

CONSULTANT DETAIL

CIVIL CONCEPTS
Consulting Civil and Structural Engineers
P.O. BOX 36148 Menlo Park 0102
Tel: (012) 460-0008
Fax: (012) 460-0005
E-Mail: mail@civilconcepts.co.za

I, **W. STANDER** Prof. Reg. No. 20060017
HEREBY CERTIFY THAT THE SERVICES WILL HAVE BEEN INSTALLED ACCORDING TO NOTE 9 OF THE ABOVE NOTES AND TO THE DRAWING

SIGNATURE: _____ DATE: _____

CONSULTANT DRAWING NUMBER: **C3034-SR-004**

| DESIGNED | |
|----------------------------|-------------------------|
| NAME: W. STANDER | Prof. Reg. No. 20060017 |
| SIGNATURE: _____ | DATE: 02-12-2022 |
| DRAWN | |
| NAME: R. WILLERS | |
| SIGNATURE: _____ | DATE: 02-12-2022 |
| CHECKED | |
| NAME: W. STANDER | Prof. Reg. No. 20060017 |
| SIGNATURE: _____ | DATE: 02-12-2022 |
| INFORMATION OFFICE CHECKED | |
| NAME: _____ | Prof. Reg. No. _____ |
| SIGNATURE: _____ | DATE: _____ |
| DESIGN OFFICE APPROVAL | |
| NAME: _____ | Prof. Reg. No. _____ |
| SIGNATURE: _____ | DATE: _____ |

| | |
|--------------|------------|
| CONTRACT No: | C3034/1 |
| PROJECT No: | C3034 |
| SHEET No: | 1 OF 1 |
| PAPER SIZE: | A1 |
| SCALE: | 1:1500 |
| DATE: | MARCH 2022 |

PROJECT STATUS

RECEIVED SIGN WHEN APPLICABLE

CONCEPT DRAWING
 TENDER DRAWING
 APPROVED CONSTRUCTION DRAWING
 AS BUILT DRAWING

PROJECT ENGINEER OF COT:

NAME: _____ Prof. Reg. No.: _____
SIGNATURE: _____ DATE: _____

INSPECTOR OF WORKS OF COT:

NAME: _____ Prof. Reg. No.: _____
SIGNATURE: _____ DATE: _____

LOCATION OF PROJECT:
DERDEPOORT PTN 426 & 679
(DERDEPOORTPARK EXT.44)

DESCRIPTION OF PROJECT:
WATER LAYOUT
(SERVICE REPORT)

WBS No.: _____

COT DRAWING NUMBER: _____