

**NON-DR BLASTING NOTES**

1. PEAK PARTICLE VELOCITY (PPV) SHALL IN GENERAL NOT EXCEED 2 INCHES PER SECOND MEASURED ADJACENT TO ANY WSSC FACILITIES, INCLUDING PIPELINES AND SURFACE STRUCTURES IN VICINITY OF BLASTING OPERATIONS. FOR PCPP OR OTHER BRITTLE PIPELINES AND PIPELINES IN POOR CONDITIONS, A STRICTER LIMIT MAY BE APPLIED AT THE DISCRETION OF WSSC. (ALSO, DEPENDING ON SIZE, TYPE, MATERIAL, AND IMPORTANCE OF THE PIPE THE LIMIT CAN CHANGE AT THE DISCRETION OF WSSC).
2. PPV LIMITS ABOVE 2 INCHES PER SECOND MAY FURTHER BE REDUCED OR NO BLASTING MAY BE IMPOSED AT THE DISCRETION OF WSSC UPON REVIEW OF BLASTING SUBMITTALS AND CONDITION OF STRUCTURES. (DEPENDING ON SIZE, TYPE, MATERIAL, AND IMPORTANCE OF THE PIPE THE LIMIT CAN CHANGE AT THE DISCRETION OF WSSC).
3. IMPACT OR IMPULSIVE NOISE FROM BLASTING OPERATIONS WILL NOT EXCEED 140 DB PEAK SOUND PRESSURE LEVEL MEASURED AT NEAREST FACILITIES OR PROPERTY LINE.
4. IN THE EVENT THAT AIR BLAST PRESSURE, VIBRATION, NOISE, FLYING DEBRIS, OR OVER BREAKAGE EXCEED SPECIFIED LIMITS, ALL BLASTING OPERATIONS ARE TO BE IMMEDIATELY SUSPENDED UNTIL THE IMPACTED FACILITY IS INSPECT, REPAIRED IF NEEDED, AND A MODIFIED BLASTING PLAN IS SUBMITTED AND APPROVED.
5. BLASTING WITHIN 200 FEET OF WSSC FACILITIES REQUIRES COMPLIANCE WITH WSSC 2020 STANDARD SPECIFICATION 02315 - EARTHWORK FOR PIPELINE CONSTRUCTION AND A WSSC-APPROVAL SPECIFIC TO THE BLASTING PROJECT.
6. FOR EACH BLAST, SEISMOGRAPHS SHOULD BE PLACED AT EDGE OF THE TWO (2) NEAREST WSSC WATER, SEWER AND/OR OTHER STRUCTURES. (DEPENDING ON SIZE, TYPE, MATERIAL, AND IMPORTANCE OF THE PIPE THE SEISMOGRAPH NUMBERS CAN CHANGE AT THE DISCRETION OF WSSC).
7. ALL BLASTING IS TO BE PERFORMED IN COMPLETE COMPLIANCE WITH THE APPROVED MONTGOMERY/PRINCE GEORGE COUNTY BLASTING PERMIT AND PLANS.
8. WSSC MUST BE NOTIFIED THREE (3) BUSINESS DAYS PRIOR TO BEGINNING ANY BLASTING WORK PCP CONTRACT MANAGER XXXXX.XXXXX@WSSCWATER.COM (FOR PCPP ADD DSD PROJECT MANAGER XXXXX.XXXXX@WSSCWATER.COM, SCD KAREN.WRIGHT@WSSCWATER.COM AND WCAS ARTURO.ACEVEDO@WSSCWATER.COM)
9. COORDINATE WITH WSSC UTILITY SERVICES AND SYSTEM CONTROL AT LEAST 30 DAYS AHEAD IF WSSC DETERMINES THAT SHUTOFF OF WATER MAIN IS NECESSARY.
10. SEISMOGRAPH REPORTS INCLUDING PEAK PARTICLE VELOCITIES SHALL BE MADE AVAILABLE TO A REPRESENTATIVE OF THE WSSC AFTER EACH SHOT AND SEND TO DSD PROJECT MANAGER XXXXX.XXXXX@WSSCWATER.COM (16-INCH AND LARGER WATER PIPES AND 15-INCH AND LARGER SEWER PIPES TO ESD HAILI.YERDAW@WSSCWATER.COM AND PCPP PIPES TO WCAS ARTURO.ACEVEDO@WSSCWATER.COM).

**SPECIAL NOTES**

- (1) BLASTING PLANS ARE REVIEWED BY WSSC AT THE REQUEST OF MONTGOMERY/PRINCE GEORGE COUNTY AS PART OF THE COUNTY'S PERMIT APPLICATION PROCESS. WSSC'S REVIEW OF THE PLANS DOES NOT CONSTITUTE ISSUANCE OF A PERMIT TO PERFORM SHEETING AND SHORING, RETAINING WALL, OR BLASTING OPERATIONS.
- (2) THE APPLICANT IS SOLELY RESPONSIBLE FOR ANY AND ALL DAMAGE TO WSSC FACILITIES OR ANY INTERRUPTION IN SERVICE CAUSED BY OR RESULTING FROM ANY ACTIVITY ASSOCIATED WITH THE APPLICANT'S BLASTING OPERATIONS. IN EXCHANGE FOR WSSC'S APPROVAL OF THE APPLICANT'S BLASTING PLANS, APPLICANT ACKNOWLEDGES AND AGREES THAT IT SHALL REPAIR OR REPLACE, AT NO COST TO AND TO WSSC'S COMPLETE SATISFACTION, ANY AND ALL WSSC FACILITIES DAMAGED DURING THE APPLICANT'S BLASTING OPERATIONS. THE APPLICANT FURTHER ACKNOWLEDGES AND AGREES THAT IT SHALL RESTORE ANY INTERRUPTION OF SERVICE AT NO COST TO AND TO WSSC'S COMPLETE SATISFACTION.

**STANDARD NOTES FOR BLASTING PLANS**

The notes on these sheets are for reference ONLY, use when applicable. Text in red is informational text and should be updated or removed. All notes may require modification to meet your specific design plan needs.

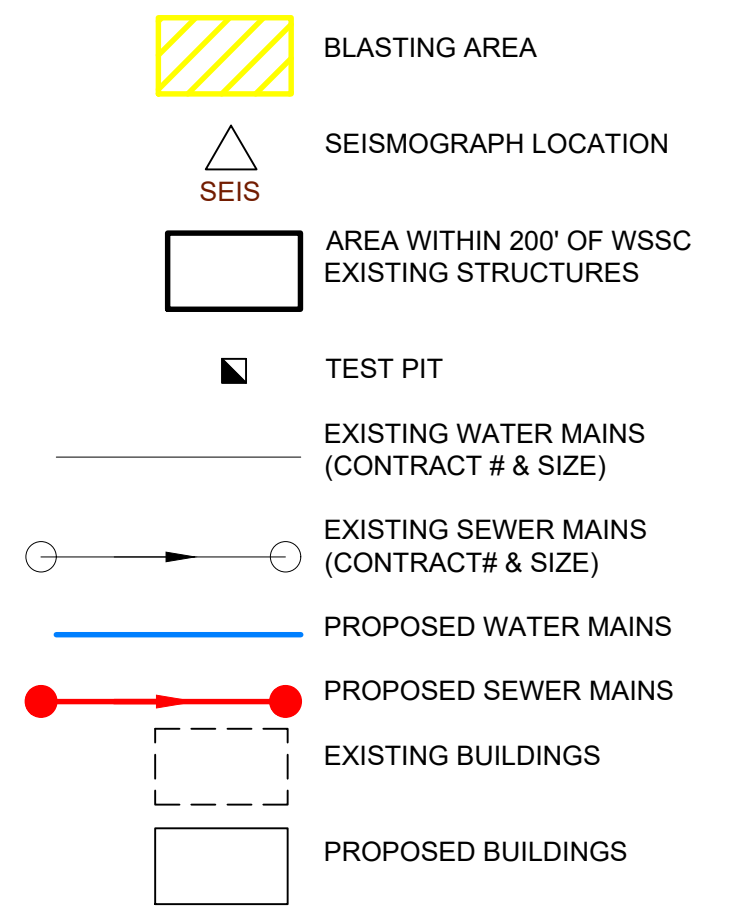
All text on plans and profiles must be a minimum height of 1/10 of an inch.

NAD 83/01  
NVD 1629

ENGINEER CAN CONFIRM THE ADC GRIDS WITHIN WSSC WERI SYSTEM UNDER THE LAYER LIST, BASE CONTENT AND SELECTING GRID ADC 2007.

**VICINITY MAP**  
SCALE 1" = MAP UNITS  
\* NAME Co. PAGE PAGE# GRID GRID#

FOR LOCATION OF UTILITIES CALL 8-1-1 OR 1-800-257-7777 OR LOG ON TO www.call811.com or www.missutility.net 48 HOURS IN ADVANCE OF ANY WORK IN THIS VICINITY.



**SEAL.**  
1 - 5/8" ≤ Size ≤ 2 - 0"

**SEAL.**  
1 - 5/8" ≤ Size ≤ 2 - 0"

**PROFESSIONAL CERTIFICATION**

I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED OR APPROVED BY ME, AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MARYLAND.

LICENSE NO.: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

**ENGINEER'S/SURVEYOR'S AS-BUILT CERTIFICATION**

I HEREBY CERTIFY THAT THE AS-BUILT INFORMATION AS SHOWN IN (RED OR GREEN) HEREIN IS ACCURATE TO THE BEST OF MY PROFESSIONAL KNOWLEDGE AND HAS BEEN ESTABLISHED BY A FIELD RUN SURVEY USING ACCEPTABLE SURVEYING METHODS BY MYSELF AND/OR SOMEONE UNDER MY SUPERVISION ON (EFFECTIVE DATE). ALL AS-BUILT DATA IS SHOWN IN 'BOXES'.

LICENSE NO.: \_\_\_\_\_

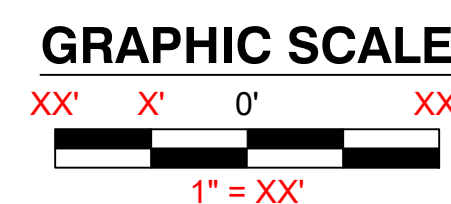
EMAIL ADDRESS: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

THESE DOCUMENTS CONTAIN PRIVILEGED AND CONFIDENTIAL INFORMATION WHICH SHALL NOT BE REDISTRIBUTED WITHOUT PRIOR WSSC APPROVAL

EASEMENT REQUIRED - ON PROP. [Y or N] - OFF PROP. [Y or N]

<b>CONTRACT</b>		<b>CONTRACT#</b>	
200'S	200'SHEET#	NO	1
		OF	#



ADD THE NOTE ON THE RIGHT IF PROPOSED OR EXISTING C.I.P. SIZE PIPE ARE SHOWN ON THIS PLAN.

Drainage Basin Name/Minibasin XX-XXX  
ELECTION DISTRICT NAME & #  
**PROJECT (WATER/SEWER)**  
STREET  
SUBDIVISION



**APPLICANT:**  
NAME: COMPANY NAME  
ADDRESS: STREET ADDRESS  
CITY, STATE AND ZIP CODE  
PHONE: PHONE NUMBER  
CONTACT: CONTACT PERSON'S NAME  
CONTACT EMAIL: CONTACT PERSON'S EMAIL ADDRESS

**ENGINEER:**  
NAME: Sole Proprietor or Firm name  
REGISTRATION #: Of sole Proprietor or Firm  
CONTACT: Contact person's name  
ADDRESS: Contact person's address including City, State and Zip  
PHONE: Contact person's phone number  
CONTACT EMAIL: Contact person's full email address

HORIZ. DATUM = NAD 83/91  
 VERT. DATUM = NGVD 1929

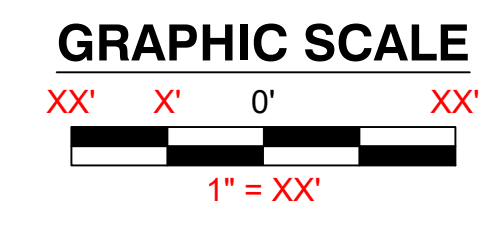
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 LICENSE NO.: \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_  
 EXPIRATION DATE: \_\_\_\_\_

**ENGINEER'S/SURVEYOR'S AS-BUILT CERTIFICATION**  
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 EXPIRATION DATE: \_\_\_\_\_

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ADD THE NOTE TO THE RIGHT IF PROPOSED OR EXISTING C.I.P. SIZE PIPE IS SHOWN ON THIS PLAN.

WASHINGTON SUBURBAN SANITARY COMMISSION



**ENGINEER:**  
 NAME: Sole Proprietor or Firm name  
 REGISTRATION #: Of sole Proprietor or Firm  
 CONTACT: Contact person's name  
 ADDRESS: Contact person's address including City, State and Zip  
 PHONE: Contact person's phone number  
 CONTACT EMAIL: Contact person's full email address

ELECTION DISTRICT NAME & #  
**PROJECT (WATER/SEWER)**  
 STREET  
 SUBDIVISION

CONTRACT CONTRACT#  
 200'S 200'SHEET# OF #

TEMPLATE LAYOUT CURRENT as of 06/01/2024

VERIFY SCALE - BAR IS ONE INCH ON ORIGINAL DRAWING 0 1" IF NOT ONE INCH ON THIS SHEET, ADJUST SCALES ACCORDINGLY.