

**SANITARY SEWER NOTES:**

1. THE CONTRACTOR SHALL NOTIFY THE DIVISION OF SANITATION & WATER SUPPLY A MINIMUM OF TWO (2) WORKING DAYS PRIOR TO WORK INVOLVING ANY SANITARY SEWER FACILITIES. NOTIFICATION IS TO BE MADE BY CALLING (516) 571-7502 OR (516) 571-7505.
2. THE PROJECT IS LOCATED IN THE NASSAU COUNTY SEWER AND STORMWATER RESOURCES DISTRICT, SEWERAGE COLLECTION SERVICE AREA. THEREFORE, ALL SANITARY SEWER WORK SHALL BE IN ACCORDANCE WITH NCDPW STANDARD SPECIFICATIONS AND DETAILS FOR THE CONSTRUCTION OF SANITARY SEWERS, LATEST ADDITION 1993 UNDER A PERMIT AND/OR SEWER AGREEMENT WITH THE COUNTY. ALL WORK MUST BE PERFORMED IN THE PRESENCE OF NASSAU COUNTY INSPECTOR.
3. ALL SANITARY SEWER HOUSE CONNECTIONS AND LATERALS SHALL BE LOCATED PRIOR TO ANY EXCAVATION BY THE CONTRACTOR.
4. THE HORIZONTAL/VERTICAL SEPARATION OF SEWER AND DRAINAGE PIPE WATER MAINS/SERVICES SHALL MEET TO EXCEED THE REQUIREMENTS OUTLINED IN THE RECOMMENDED STANDARDS FOR SEWAGE WORKS (TEN STATE STANDARDS), LATEST EDITION.
5. WHERE SANITARY OR HOUSE CONNECTION SEWERS CROSS OVER A DRAINAGE TRENCH AREA, THE SEWER SHALL BE REPLACED WITH DUCTILE IRON EXTENDING A MINIMUM OF FIVE (5) FEET EACH SIDE OF CROSSING TO UNDISTURBED SOIL. THE SAME REPLACEMENT SHALL APPLY FOR SEWERS UNDER A DRAINAGE TRENCH AREA WITHIN TWELVE (12) INCHES CLEARANCE, BOTTOM OF DRAIN TO TOP OF SEWER.
6. ALL PIPES, MANHOLES AND APPURTENANCES SHALL HAVE THE COUNTY APPROVAL STAMP THEREON OR WRITTEN CERTIFICATION ACCEPTABLE TO THE COUNTY BEFORE THE MATERIAL CAN BE INSTALLED.
7. WHERE IT IS NECESSARY TO RAISE SANITARY SEWER MANHOLE CASTINGS TO GRADE FOR REPAVING, FIXED FRAME CASTINGS MUST BE RAISED EITHER BY ADJUSTING THE HEIGHT OF THE BRICK MASONRY OR USING AN APPROVED INSERT (METAL INSERTS ARE NOT PERMITTED). ADJUSTABLE FRAME TYPE MANHOLES MAY BE RAISED BY ADDING UP TO A MAXIMUM OF TWO (2), ONE (1) INCH ADJUSTMENT RINGS TO ACHIEVE FINAL GRADE.
8. THE CONTRACTOR SHALL COMPLY WITH ALL OSHA REQUIREMENTS FOR ENTRY INTO A CONFINED SPACE WHENEVER IT IS NECESSARY FOR A CONTRACTOR'S EMPLOYEE TO ENTER A NASSAU COUNTY SANITARY SEWER MANHOLE. THE MINIMUM REQUIREMENTS THE CONTRACTOR MUST COMPLY WITH ARE:
  - CONTRACTOR ISSUED "ENTRY PERMIT"
  - CONFINED SPACE ENTRY MONITOR TO TEST FOR TOXIC, EXPLOSIVE AND OXYGEN DEFICIENT ATMOSPHERE
  - CONFINED SPACE RESCUE AND RETRIEVAL EQUIPMENT
9. THE CONTRACTOR WILL NOT BE PERMITTED TO WORK IN A NASSAU COUNTY SANITARY SEWER MANHOLE UNLESS HE COMPLIES WITH ALL APPLICABLE OSHA REQUIREMENTS.

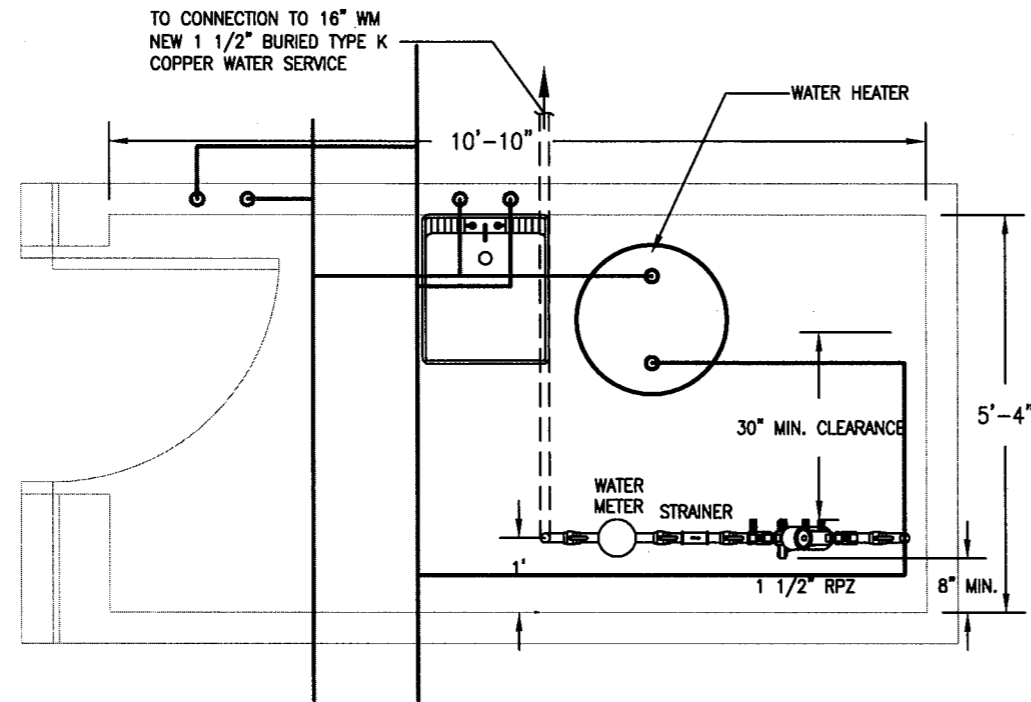
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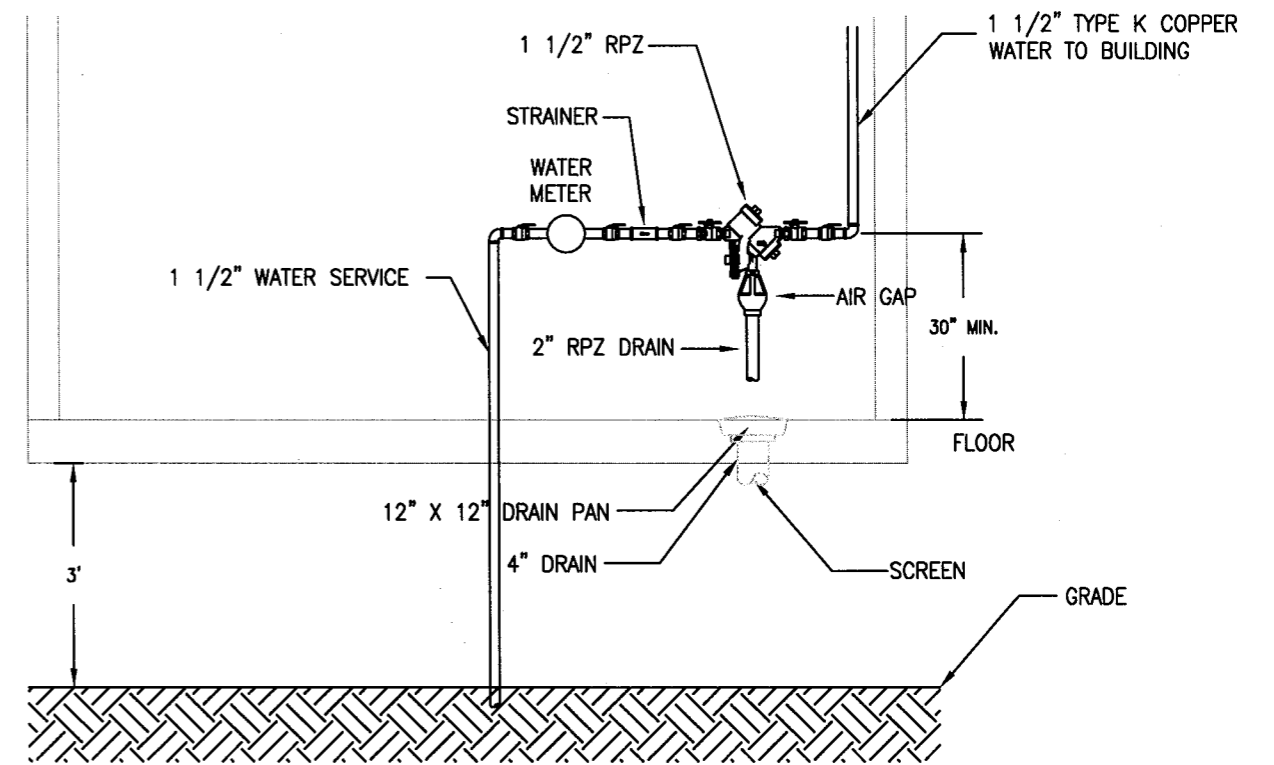
**PUBLIC SAFETY OFFICES  
GARDEN CITY, NY**

DWG TITLE **UTILITY PLAN**

ISSUE DATE: \_\_\_\_\_  
REVISION DATE: \_\_\_\_\_  
SCALE: 1"=40'  
DWN BY: AW



**FLOOR PLAN**



**ELEVATION**

**RPZ INSTALLATION DETAILS**

**WATER SERVICE NOTES:**

1. IT IS A VIOLATION TO BYPASS A RECOGNIZED BACKFLOW PREVENTER DEVICE.
2. INSTALLATION OF DEVICES TO MEET ALL NASSAU COUNTY HEALTH DEPARTMENT AND NEW YORK STATE HEALTH DEPARTMENT REQUIREMENTS. INSTALLATIONS ARE TO CONFORM TO THE HEMPSTEAD WATER DISTRICT'S RULES, REGULATIONS AND PLUMBING CODES.
3. DEVICES MUST NOT BE SUBJECT TO FLOODING OR FREEZING.
4. DEVICES SHALL BE TESTED ANNUALLY BY A NEW YORK STATE HEALTH DEPARTMENT CERTIFIED TESTER. TEST REPORTS MUST BE SUBMITTED TO BOTH THE HEMPSTEAD WATER DISTRICT AND THE NASSAU COUNTY DEPARTMENT OF HEALTH.
5. INSTALLATION SHALL BE PERFORMED BY LICENSED PLUMBER APPROVED BY AND BONDED TO THE HEMPSTEAD WATER DISTRICT.
6. ALL APPURTENANCES TO BE FURNISHED AND INSTALLED MUST MEET THE SPECIFIED STANDARDS AND THE APPROVAL OF THE HEMPSTEAD WATER DEPARTMENT.
7. ALL BACKFLOW PREVENTER SHALL BE LISTED IN THE CURRENT PUBLIC WATER SUPPLY ENVIRONMENTAL HEALTH MANUAL FOR THE STATE OF NEW YORK.
8. DOMESTIC WATER SERVICES SHALL CONSIST OF 1 1/2" TYPE K COPPER PIPE.
9. ALL SERVICES SHALL BE AS SHORT AND STRAIGHT AS POSSIBLE.
10. ALL SERVICES MUST BE A MINIMUM OF 48" BELOW GRADE.
11. REDUCED PRESSURE ZONE ASSEMBLY AS SHOWN TO BE INSTALLED BY PLUMBER. RPZ SHALL BE 1 1/2" WILKINS MODEL 975.
12. ALL CONCRETE SHALL HAVE A MINIMUM COMPRESSIVE STRENGTH OF AT LEAST 4,000 P.S.I. AT 28 DAYS.
12. ALL CONCRETE SHALL HAVE A MINIMUM COMPRESSIVE STRENGTH OF AT LEAST 4,000 P.S.I. AT 28 DAYS.
13. TEST COCKS SHALL NOT FACE BACK WALL AND SHALL BE ACCESSIBLE TO THE TESTER.
14. ALL VALVES TO OPEN COUNTERCLOCKWISE (RIGHT HAND VALVES).
15. NO LEAD SOLDER SHALL BE USED FOR THE INSTALLATION.
16. LAYOUT SHOWN IS APPROXIMATE. ADJUSTMENTS CAN BE MADE TO FIT FIELD CONDITIONS AND JOB REQUIREMENTS UPON THE WATER DISTRICT'S APPROVAL. MINIMUM CLEARANCES MUST BE MAINTAINED. ORDER OF PARTS MUST BE MAINTAINED.
17. INSTALLER TO NOTIFY THE TOWN OF HEMPSTEAD WATER DEPARTMENT- UNIONDALE DISTRICT UPON COMPLETION OF WORK.

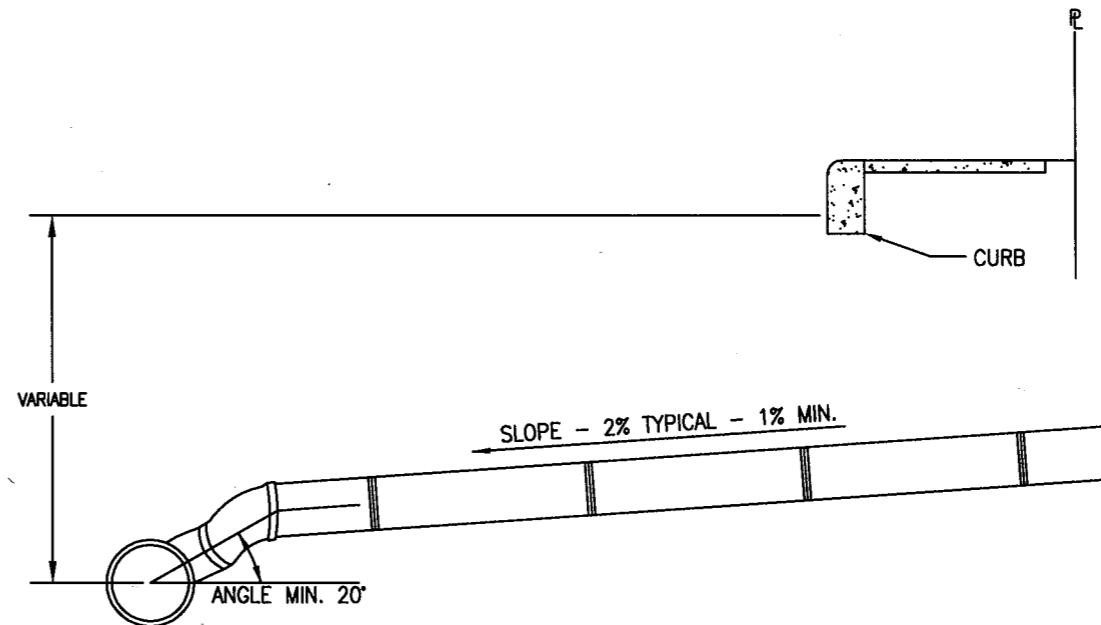
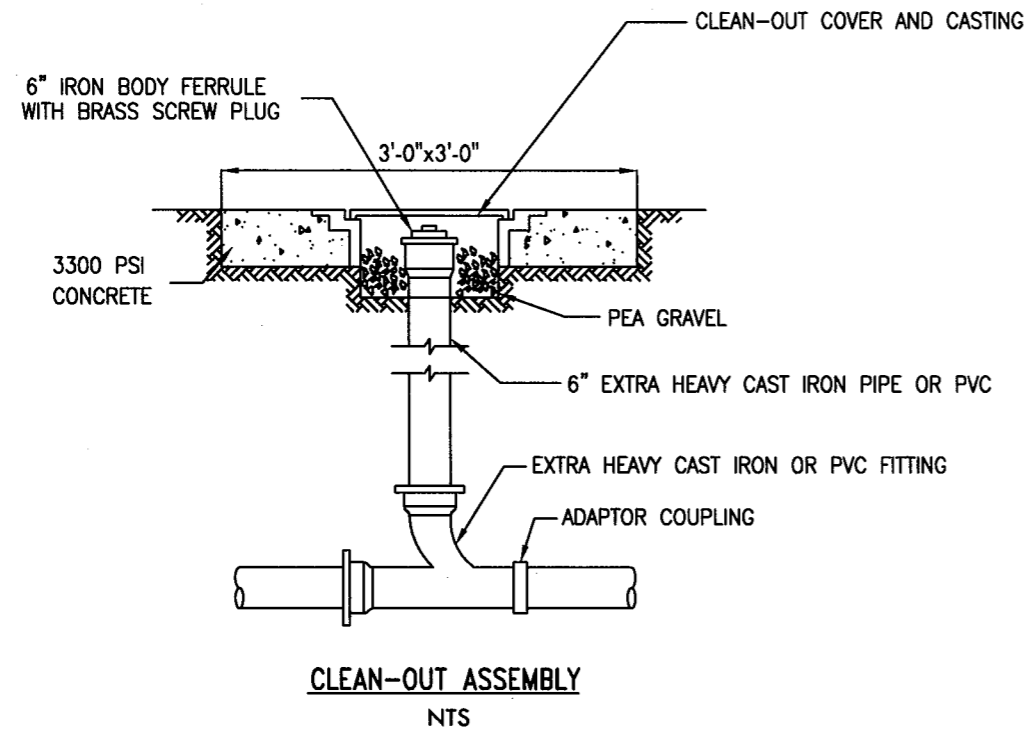
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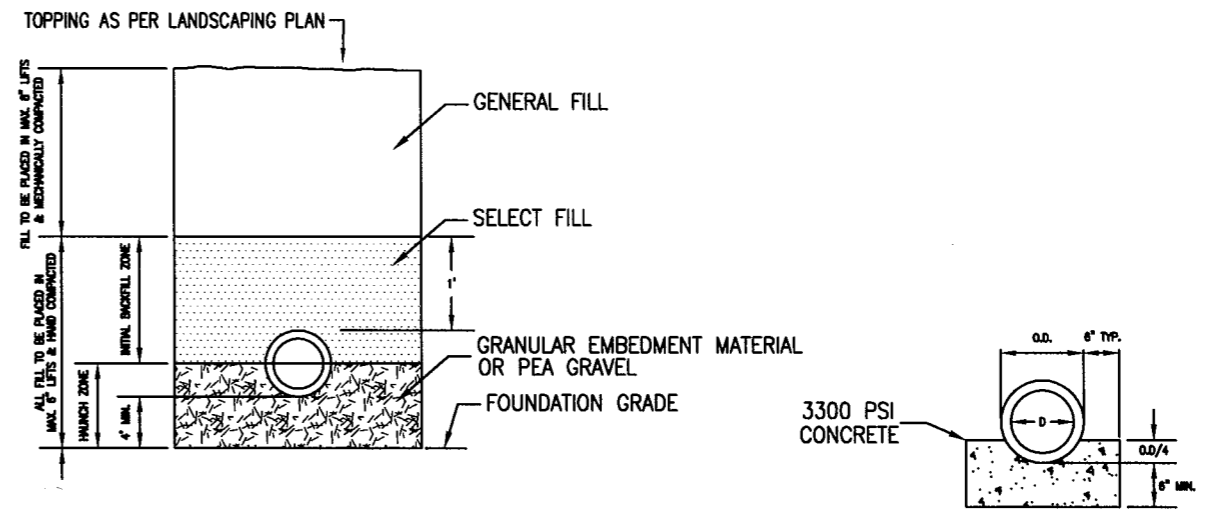
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DWG TITLE: **WATER SERVICE NOTES &  
RPZ INSTALLATION DETAILS**  
ISSUE DATE: \_\_\_\_\_  
REVISION DATE: \_\_\_\_\_  
SCALE: 1/30  
DWN BY: AW  
DWG NO: \_\_\_\_\_



**PROFILE OF TYPICAL HOUSE CONNECTION**  
NTS



**TYPICAL CONCRETE CRADLE**  
NTS

NOTES:

1. ALL MATERIALS TO BE COMPACTED TO A MINIMUM DRY DENSITY OF NINETY-FIVE (95) PERCENT OF THE STANDARD PROCTOR DENSITY.
2. THIS DETAIL APPLIES IN AREAS WITH SUITABLE FOUNDATION MATERIAL BELOW THE FOUNDATION GRADE.
3. IN LIEU OF PROVIDING 4" OF GRANULAR EMBEDMENT MATERIAL OF PEA GRAVEL BELOW THE BOTTOM OF THE PIPE, THE CONTRACTOR HAS THE OPTION OF PROVIDING A SHAPED BOTTOM.

**TYPICAL PIPE BEDDING & TRENCH BACKFILL DETAIL**  
NTS

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