In accordance with WAC 246-290-120(5), a **Construction Completion Report Form** is required for all approved construction projects. Purveyors **must** submit a Construction Completion Report to the Department of Health (DOH) within sixty (60) days of completion and before use of any water system facility. This includes any storage tank and booster pump facilities reviewed under the submittal exception process as provided by WAC 246-290-125(3). Under the submittal exception process for other distribution-related facilities (including distribution main projects), designed by a professional engineer but not submitted to DOH for approval, the report does not need to be submitted. However, the purveyor **must** keep the Construction Completion Report on file and make it available for review upon request by DOH in accordance with WAC 246-290-125 (2)(b) and WAC 246-290-125(3)(f).

Furthermore:

1. The report form **must** bear the seal, date and signature of a professional engineer (PE) licensed in the state of Washington;
2. If project construction is being completed in stages, attach a description of the portion of the project being completed as approved that is acknowledged by a PE on the date given below;
3. As future portions of staged construction projects are completed, each **must** be acknowledged by a PE; and
4. Per WAC 246-290-120(5)(c), the amount of change in the physical capacity of a system must be documented, if the project results in a change in physical capacity.

**Please type or print legibly in ink:**

<table>
<thead>
<tr>
<th>CITY OF RENTON</th>
<th>DOH System ID No.: 71850L</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Water System</td>
<td>GEORGE STAHL</td>
</tr>
<tr>
<td>Name of Purveyor (Owner or System Contact)</td>
<td>3555 NE 2ND STREET</td>
</tr>
<tr>
<td>Date WSP Approved by DOH</td>
<td>9/19/2013</td>
</tr>
</tbody>
</table>

**Mailing Address**

<table>
<thead>
<tr>
<th>RENTON</th>
<th>WA</th>
<th>98056</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
<td>Zip</td>
</tr>
</tbody>
</table>

**Type of Project** (check all that apply):

- [ ] Booster Pump Station(s) - If checked send form to DOH
- [ ] Reservoir and Storage Tank(s) – If checked send form to DOH
- [ ] Pressure Tank(s)
- [ ] Internal Tank Coating
- [ ] Transmission Main(s)
- ___ Other (specify):

**DISTRIBUTION MAIN(S)**

For project reports and construction documents that have not been reviewed by DOH, provide name of PE who completed **Engineering Design Review Report Form** (a departmental form):

---

DOH Form 331-146 (Updated 08/10)
Project Name and Descriptive Title:
Check one:  
☐ Entire Project Completed.  ☐ Description of Portions Completed.

Complete (Attach additional sheets as needed):

Professional Engineer’s Acknowledgment

The undersigned professional engineer (PE), or their authorized agent, has inspected the above-described project which, as to layout, size and type of pipe, valves and materials, reservoir and other designed physical facilities, has been constructed and is substantially completed in accordance with construction documents reviewed by the purveyor’s engineer or approved by the DOH. In the opinion of the undersigned engineer, the installation, physical testing procedures, water quality tests, and disinfection practices were carried out in accordance with state regulations and principles of standard engineering practice.

I have reviewed the disinfection procedures ☐, pressure test results ☐, and results of the bacteriological test(s) ☐ for this project and certify that they comply with the requirements of the construction standards/specifications approved by the DOH. (Check all boxes that apply that are consistent with the nature of the project.)

This project changes the physical capacity of the system to serve consumers. The system is now able to serve ___________ equivalent residential units (ERUs.)  ☐ Not applicable

Name of Engineering Firm**

Name of PE Acknowledging Construction

Mailing Address**

City State Zip**

Engineer’s Signature Date

**Complete if PE acknowledging construction completion is not employed directly by water system.

Please return completed form to DOH regional office checked below if the project is for new storage tanks or booster pump stations. For all other distribution related projects, please maintain on file.

☐ Northwest Drinking Water Department of Health  
20425 72nd Ave S, Suite 310  
Kent, WA 98032-2358  
Phone: (253) 395-6750  
Fax: (253) 395-6760

☐ Southwest Drinking Water Department of Health  
PO Box 47923  
Olympia, WA 98504-7823  
Phone: (360) 236-3030  
Fax: (360) 664-8058

☐ Eastern Drinking Water Department of Health  
16201 E Indiana Ave, Suite 1500  
Spokane Valley, WA 99216  
Phone: (509) 329-2100  
Fax: (509) 329-2104

The purveyor must attach a completed Water Facilities Inventory (WFI) form in accordance with WAC 246-290-120(6), if applicable. Contact the regional office in your area for WFI forms or additional Construction Completion Report forms.

If you need this publication in an alternate format, call (800) 525-0127. For TTY/TDD call (800) 833-6388.

DOH Form 331-146 (Updated 08/10)