

MODEL 3411AS - 3412AS - 3414AS - 3421AS - 3422AS All Stainless Saddle

Quality Control Department SAFETY FIRST - Always use cave-in protection, gloves, sturdy works boots, and eye protection when tapping pipe.



GENERAL NOTES:

- Use cave-in protection during excavation and back-fill operations.
- Verify Pipe O.D. to make certain that the correct Service Saddle is being installed.
- Keep bolt threads clean and free from nicks, dents or other damage.
- If conditions permit, mark the pipe for a reference point to properly position the Saddle.
- Lubrication of the O-ring with a soap solution reduces friction and more evenly distributes clamping force. For cold weather lubrication, ethylene glycol can be added to the soap solution to prevent freezing.

RECOMMENDED TORQUE

Bolt Diameter	Torque (ft-lb)
5/8"	50-70



1 Check pipe diameter to insure that correct saddle is being installed.



2 Thoroughly clean the pipe so surface is smooth and free of dirty and other debris.



3 Loosen nuts until flush with top of studs, and place saddle around pipe.



4 Close lug fingers and studs together by pulling the washer bar upward and snapping the lip over the finger baseplate. Loosely tighten nuts.



5 Locate outlet in desired position.



6 Torque nuts 50 - 70 ft/lbs to form a gasket seal. Do not over torque as it will not increase sealing ability and may cause plastic pipe failure.

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If necessary to reposition, loosen nuts prior to moving saddle and then retorque.



Tap through corporation stop utilizing a VegaDrill for best results on plastic pipe.



Leave each connection exposed and field pressure test prior to backfilling to assure proper installation on the pipe.

If dry tapping follow the above, but also retorque the nuts after field testing to compensate for pipe expansion.

PRE-INSTALL CHECKLIST:

DID YOU:

- Clean pipe surface thoroughly? [Y] [N]
- Check O.D. of pipe with measuring tape? [Y] [N]
- Lubricate the Pipe with Dishwashing Soap? [Y] [N]
- Verify Proper Torque Required? [Y] [N]

Warranty Checklist (*):

- Date of Installation __/__/__
- Time of Installation _____ [AM] [PM]
- Was Pre-Tap Pressure Test completed to appropriate pressure level? [Y] [N]
- What Pressure was it tested to? ____ psi
- Was standard re-torquing applied 5 minutes after reaching torque requirements? [Y] [N]

• Signature of On-Site Leadman: _____

*** Must be completed on day of installation to Validate Warranty**