Drip Irrigation Line Flushing Record

General Info	rmation				
Date:					
Time:					
Location/Field:					
Performed by:					
Supervisor:					
Flushing Det	ails				
Line/Zone	Start Time	End Time	Duration	Notes/Comments	Initials
Remarks / O	bservations				
Signature					
Operator:					
Date:					
Supervisor:					
Date:					