MODEL 3411DI - 3413DI - 3415DI - 3417DI - 3417AS - 3417SW Saddle

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



GENERAL NOTES:

Notes:

- Over torqueing will not increase the ability of the saddles to seal
- Suitable pipe thread sealant is recommended
- Length of bolt thread protruding past top of nut should be equal distance on both sides
- Use cave-in protection during excavation and back-fill operations.
- Verify pipe O.D. to make certain that the correct range saddle is being used.
- Keep bolt threads clean and free from nicks, dents or other damage.
- Lubrication of the gasket with soap solution reduces friction and more evenly distributes clamping force.

Always re-tighten nuts after installation of the valve or service line.

RECOMMENDED TORQUE 3411 - 3413	
Bolt Diameter	Torque (ft-lb)
1/2″	30-50
5/8″	50-70



Clean outside of pipe thoroughly, particularly in area where Twin Seal gasket will compress.



Confirm the PowerSeal Twin Seal saddle gasket is in the proper position in the saddle body.



Lubricate pipe and face of gasket with soap and water. For cold weather lubrication, ethylene glycol can be added to the soap solution to prevent freezing.



Position the saddle Top on the pipe in the location where it is to be tapped. Rotation of the saddle should be avoided at all times.



Loosen nuts to the end of the bolt and install saddle Back (s), around the pipe and through the saddle body bolt opening.



Tighten nuts evenly per the specifications below until saddle body conforms to pipe.

MODF 3411DI - 3413DI - 3415DI - 3417DI - 3417AS - 3417SW Saddle

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To ensure proper seal of the gasket, the corporation stop or other fittings should be connected to the saddle prior to final tightening. Always re-tighten after installation of the valve or service.

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-torqueing applied 5 minutes after reaching torque requirements? [Y] [N]
- Signature of On-Site Leadman:
- * Must be completed on day of installation to Validate Warranty