様式第７号（第１５条関係）

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 令和　　年　　月　　日  黒石市長　髙　樋󠄀　　　憲　　様  所在地  指定工事業者名  給水装置工事竣工届  給水装置工事が竣工したので、黒石市指定給水装置工事事業者規則第１５条第１項の規定により届け出ます。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 決　裁　・　供　覧 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 道路  占用 | | | 申請種別 | | | | | | | | | | | □国道　 □県道　 □市道 | | | | | | | | | | | | | | | | | | | | | | 令和　　年　　月　　日  　　　　　　　様  黒石市長　髙　樋󠄀　　　憲  給 水 装 置 工 事 検 査 合 格 書  下記の給水装置工事を検査した結果、合格と認めます。  記  承認番号　　　　　第　　　　号  工事場所　　黒石市  給水装置設置者氏名 | | | | | | | | | | | | | | | | | | | |
| 市長 | | | | | | | | 部長 | | | | | | | | | 課長 | | | | | | | | | 課長補佐 | | | | | | | | | 許可番号 | | | | | | | | | | | 第　　　　　号 | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | | 施行期日 | | | 令和　　年　　月　　日　着工  令和　　年　　月　　日　完成 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| メーター取付月日 | | | | | | | | | | | | | | | | 令和　　年　　月　　日 | | | | | | | | | | | | | | | | | | | |
| メーター口径 | | | | | | | | | 製　　㎜ | | | | | | | | | | | | メーター  番号 | | | | | | | | № | | | | | | |
| 施設係長 | | | | | | | | 施 設 係 員 | | | | | | | | | | | | | | | | | | 担　当 | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | 検査月日 | | | | | | | | | 令和　　年　　月　　日 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 検査復命 | | | | | | | | | 検査員 | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 立会人 | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 備　考　　　　　　　　　　　　領　収　印 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 給水装置  設置者住所 | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | 給水装置  設置者氏名 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | 承認月日 | | | | | | | | | | | 令和　　年　　月　　日 | | | | | | | | | | | | | | | | | | | | | | | |
| 分岐引用承諾者 | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | 土地家屋  使用承諾者 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | 承認番号 | | | | | | | | | | | №　　　　　号 | | | | | | | | | | | | | | | | | | | | | | | |
| 工事種別 | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | 主任技術者 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | |  | | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  | |  | |  |  | | 名　　　称 | | 寸　　法 | | 単位 | | 数 量 | | |
|  |  | | |  | |  | | | |  | | 平　面　図 | | | | | | | | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | | 立　面　図 | | | | | | | | | |  | | |  | | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  | |  | |  |  | | PP | |  | |  | |  | | |
|  |  | | |  | |  | | | |  | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | | |  | | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  | |  | |  |  | | PP | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | PP | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | SGP-VB | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | SGP-VB | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | SGP-VD | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 水抜栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 水抜栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 不凍栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | メーター筐 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 水栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 水栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 混合水栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 止水栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | ポール式分水栓 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 保温材 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 砂砕石 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 分止水栓用継手 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | メーター用回転継手 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | メーター用回転継手 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | メーター用継手 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | チーズ | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 違径チーズ | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 継手メス | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 継手ソケット | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | |  | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | |  | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | |  | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 補足材 | |  | | 式 | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 運搬費 | |  | | 式 | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 小計 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 公道部分 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | ＋＋計 | |  | |  | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 道路復旧 | |  | | 袋  ㎡ | |  | | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | |
|  | |  | | |  | |  | | | |  | |  | |  | | |  | |  | | |  | |  | |  | | |  | |  | | |  | | |  | |  | |  | | | |  | |  | |  | | |  | |  | |  | | |  | |  | |  | | | |  | |  | |  | | | |  | | |  | |  | | | |  | |  | |  | | | |  | |  | |  | | |  | | |  | | |  | | |  | | |  | |  | | | | |  | |  | | |  | | |  | |  | | |  | |  | |  | | |  | | |  | |  |  | |  |  | | 工事雑費 | |  | | 式 | |  | | |
| 労力費 | | | 区分 | | | | | 分岐 | | | | | | | | 支栓 | | | | | 布設 | | | | | | | 布設 | | | | | | | | 布設 | | | | | | | | 小穴 | | | | | | | 水栓取付 | | | | | | | バルブ  取　付 | | | | | | | メーター止水栓取付 | | | | | | | | 継手工 | | | | | | | | | 壁中配管 | | | | | | | | 特殊器具 | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | |  | | | | | | | | | |  | | | | | | 小計 | | | 事務費 | |  | | 式 | |  | | |
| 数量 | | | | |  | | | | | | | |  | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | |  | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | | | | | |  | | | | |  | | | | | | | | | |  | | | | | |  | | | 概算合計 | |  | | | | | | |