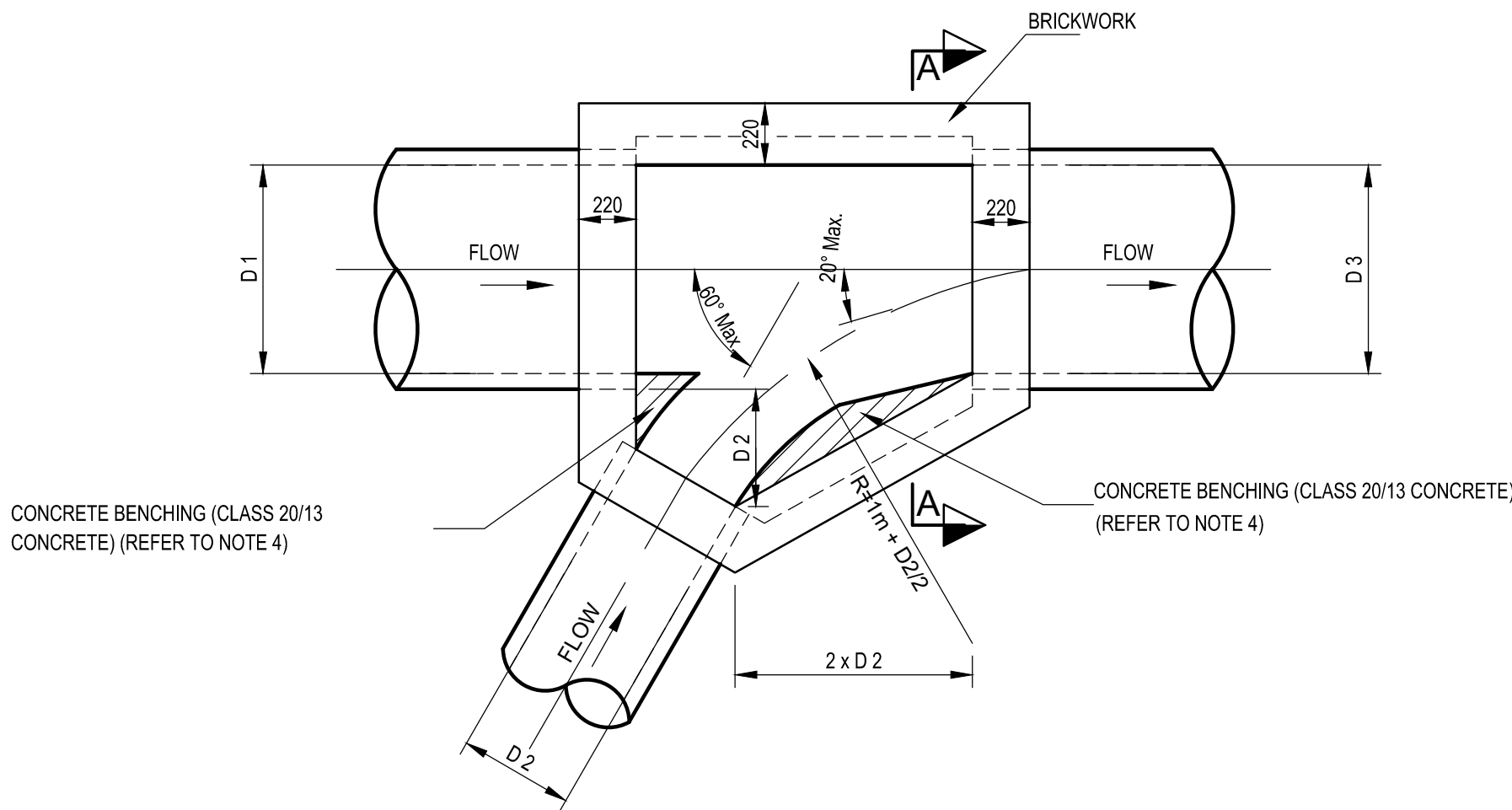
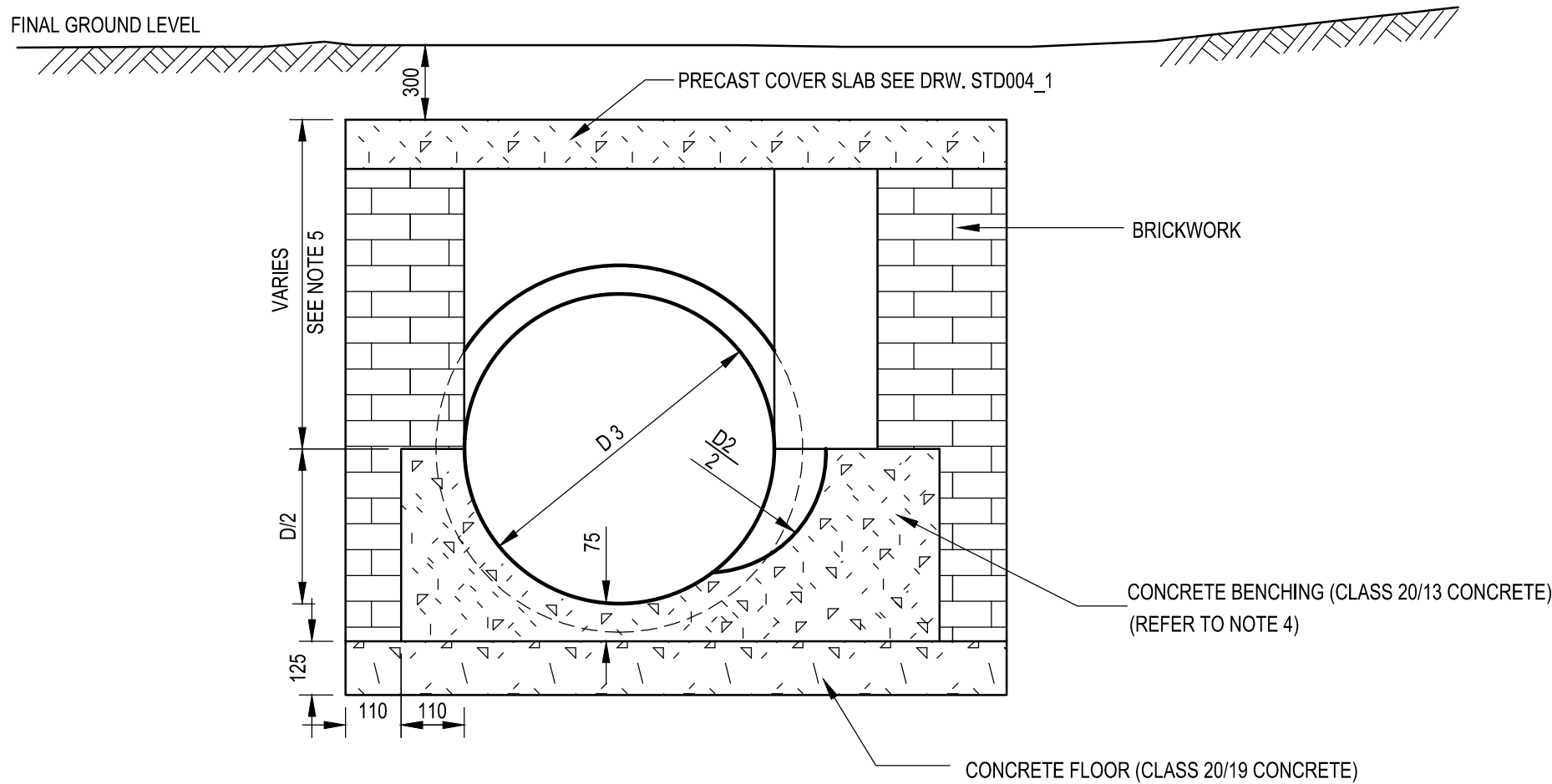




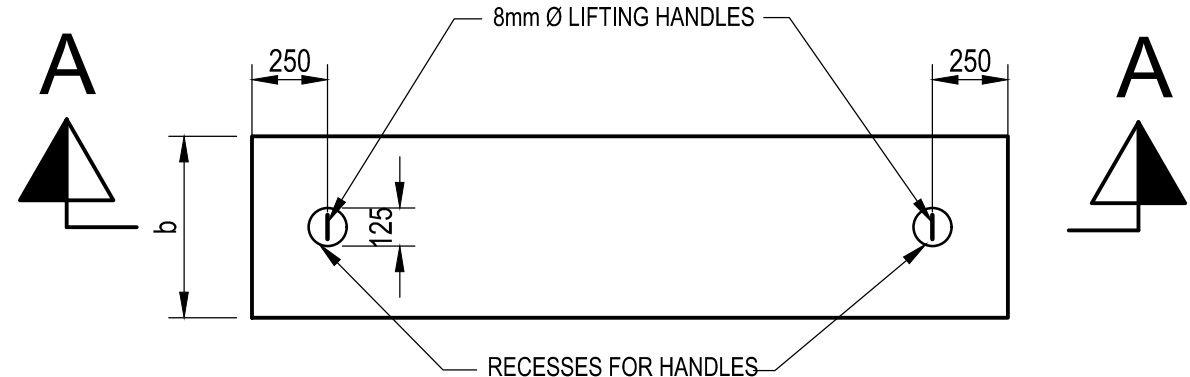
PLAN OF TYPE C JUNCTION BOX (WITHOUT COVER SLAB)

D 1 = D 3 AND D 2 VARIES



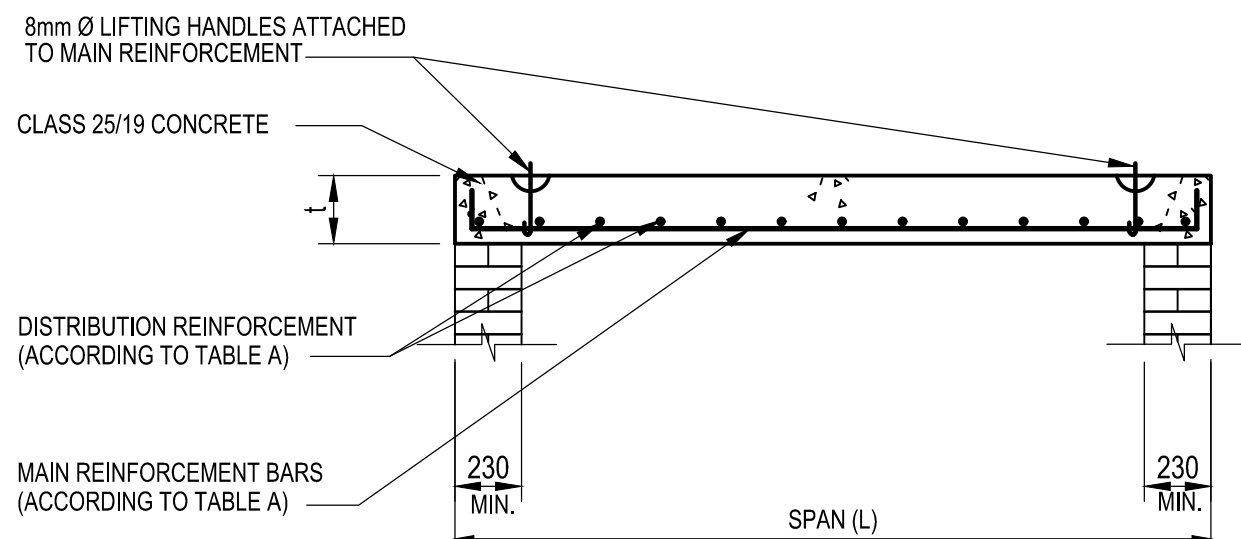
SECTION A-A

PRECAST COVER SLAB FOR JUNCTION BOXES



PLAN OF PRECAST COVER SLAB

SCALE 1: 20



SECTION A-A

SCALE 1: 20

TABLE A: PRECAST COVER SLAB REINFORCEMENT DETAILS			
Span (mm) L	Thickness (mm) t	Main Reinforcement	
		b = 450	b = 600
Up to 500	125	4Y12 -125	5Y12 -125
Up to 1000	150	5Y12 -100	5Y12 - 125
Up to 1250	150	4Y16 -125	5Y12 - 125
Up to 1500	175	4Y 16 -125	5Y12 - 125
Up to 1750	175	4Y16 -125	5Y16 - 125
Up to 2000	200	4Y16 -125	5Y16 - 125
Up to 2250	200	4Y 16 -125	5Y16 - 125
Up to 2500	200	5Y16 -100	5Y16 - 125
Up to 2750	225	5Y16 -100	5Y16 - 125
Up to 3000	225	5Y16 -100	6Y16 - 125
Distribution reinforcement: Y10 bars @ 125 c/c for all spans			
Refer to notes for bending details.			

- JUNCTION BOX:
 - ALL STORMWATER PIPES TO BE LAID SOFFIT TO SOFFIT.
 - MINIMUM PIPE DIAMETER OF ALL PIPES IS 450mm.
 - MAXIMUM ANGLE BETWEEN ADJOINING PIPES IS 60°.

1.4. WHERE A PIPE WALL IS AT LEAST 75MM FROM THE NEAREST JUNCTION BOX WALL, THE CONCRETE BENCHING CAN BE STARTED ADJACENT TO THE DOUBLE BRICK WALL.

1.5. WHERE THE TOTAL DEPTH OF THE JUNCTION BOX (INVERT LEVEL TO FINISHED GROUND LEVEL) EXCEEDS 2.0M A STRUCTURAL DESIGN MUST BE SUBMITTED BY A PROFESSIONAL ENGINEER.

1.6. ALL BRICKS SHALL COMPLY WITH SANS 227 AND SHALL BE ENGINEERING UNITS OF CLASS FBS (FACE BRICK STANDARD) WITH A NOMINAL COMPRESSIVE STRENGTH OF 12MPa.

1.7. ALSO REFER TO SANS 1200

2. PRECAST COVER SLAB:

2.1.CONCRETE TO BE CLASS 25/19 (25MPa).

2.2 CONCRETE TO BE CURED FOR A MINIMUM PERIOD OF 7 DAYS.

2.3 MINIMUM COVER TO REINFORCEMENT = 20mm.

2.4 LIFTING HANDLES AS SPECIFIED OR OTHERWISE APPROVED BY THE ENGINEER.

2.5 REINFORCEMENT:
i) TYPE, BAR AND SPACING TO AS SPECIFIED IN TABLE A.
ii) MAIN REINFORCEMENT TO BE SHAPE CODE 38, WITH HOOK LENGTH (A DIMENSION) NOT LESS THAN 1 - 60, EXCEPT FOR SLAB WITH A SPAN NOT EXCEEDING 1000mm, WHERE NO HOOKS ARE REQUIRED AND SHAPE CODE 20 IS USED.



MAQUASSI HILLS LOCAL MUNICIPALITY

PRIVATE BAG X3
WOLMARANSSTAD
2630

TEL: 018 596 1068
FAX: 018 596 1555

AMENDMENTS

REV	DATE	APPROVED	DESCRIPTION
A	SEPT 2026	G.A.M	ISSUE FOR TENDER

CONSULTANT DETAIL

DITLOU CONSULTING CC
OFFICE 19 EAST 202
SANLYNN OFFICE PARK
CNR ALKANTRAND &
LYNNWOOD ROAD
PO BOX 15684
LYNN EAST
0039
TEL: (012)548-0196
FAX: (012)548-0298
EMAIL: info@ditlouconsult.co.za

I, **G. MANYIKA** Prof Reg Nr. **2024301981**
HEREBY CERTIFY THAT THE SERVICES WILL BE INSTALLED
ACCORDING TO THE DRAWING

DATE _____ SIGNATURE _____



DESIGNED

NAME: **L.MODISHA**..... Prof Reg No:.....

SIGNATURE:..... DATE:.....

DRAWN

NAME: **L.MODISHA**.....

SIGNATURE:..... DATE:.....

CHECKED

NAME: **G. MANYIKA**..... Prof Reg No: **2024301981**.....

SIGNATURE:..... DATE:.....

INFORMATION OFFICE CHECKED

NAME:.....

SIGNATURE:..... DATE:.....

DESIGN OFFICE APPROVAL

NAME:..... Prof Reg No:.....

SIGNATURE:..... DATE:.....

CONTRACT

No.

8/1/2 N.J. MBONANI

PROJECT No.

1

SHEET No.

A1

PAPER SIZE

SCALE

AS SHOWN

DATE:

SEPT 2026

LOCATION OF PROJECT

DESIGN AND SUPERVISION OF UPGRADING OF
GRAVEL ROAD TO BLOCK PAVING AT KALANGA
MOLALE, WILLIAM OLIFANT STREETS IN LEBALENG

DRAWING NAME:

JUNCTION BOX DETAILS - SHEET 2 OF 2

CONTRACT NUMBER:

8/1/2 N.J. MBONANI

DRAWING NUMBER

1145K - 2 - 05D04

PROJECT STATUS

☐ CONCEPT
DRAWING ☒ TENDER
DRAWING ☐ CONSTRUCTION
DRAWING ☐ AS BUILT
DRAWING

PROJECT ENGINEER of MHLM:

NAME _____ SIGNATURE _____

Prof Reg No. _____ DATE _____

INSPECTOR OF WORKS of MHLM:

NAME _____ SIGNATURE _____

DATE _____