



City of Pearland Cross-Connection Control Program

Cross-Connection and Backflow Protection Survey Form

Name:		
Company/Organization:		
Service Address:	Type of Business on Property:	
City:	State:	Zip Code:
Phone:	Alternate Number:	
Utility Billing Account Number:	Email:	

What type of property is this?	Duplex	Business	Single-Family	School	Public Landscapes
	Apartment	Mixed Use	Residence	Pearland Facility	

GENERAL WATER USE AT YOUR LOCATION (OTHER THAN FIRE PROTECTION)

<p>Please check ALL boxes that apply/best describe the use of water at your facility.</p> <p>Typical, such as bathrooms, drinking fountains, outside water faucets, household laundry or dish washing appliances.</p> <p>Private well(s) supplying any part of your facility.</p> <p>Piped into a manufacturing process.</p> <p>Piped into a chemical process.</p> <p>Piped, underground lawn sprinkler/irrigation system.</p> <p>Piped into a swimming pool.</p> <p>Piped into water operated/cooled equipment/appliances/boilers.</p> <p>Medical, pathology, research chemical or bacteriological lab.</p> <p>Non-potable, recycled water, grey/rain water recovery system.</p> <p>Piped to a boiler (does not include water heaters).</p> <p>Piped to a cooling tower (does not include air conditioning).</p> <p>Hazardous chemicals onsite: _____</p>	<p>Please check ALL types of backflow prevention assembly installed on your plumbing system.</p> <p>None</p> <p>Hose Bibb Vacuum Breaker</p> <p>Residential Dual Check (RDC)</p> <p>Reduced Pressure Zone Device (RP)</p> <p>Double Check Valve (DC)</p> <p>Pressure Vacuum Breaker (PVB)</p> <p>Spill Resistant Vacuum Breaker (SVB)</p> <p>Other: _____</p> <p>Existing Assembly Information (if applicable):</p> <p>Manufacturer _____ Model _____ Serial # _____</p> <p>Size ____ Type: RP DC PVB RDC SVB HVB</p> <p>Manufacturer _____ Model _____ Serial # _____</p> <p>Size ____ Type: RP DC PVB RDC SVB HVB</p>
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FIRE PROTECTION SERVICES

<p>Please check ALL boxes that apply /best describe your fire protection account:</p> <p>This account serves private hydrants only (no fire sprinkler system in facility).</p> <p>This account serves an installed fire sprinkler system.</p> <p>Fire sprinkler system has outside fire department connections for pumping into system.</p> <p>Fire sprinkler system contains antifreeze or other chemicals.</p> <p>Fire sprinkler system is also supplied by an auxiliary source of water (i.e., pond, reservoir or storage tank).</p>	<p>Please check ALL types of backflow prevention assembly installed on your sprinkler system.</p> <p>None</p> <p>Single Swing Check with Post Indicator Valve</p> <p>Reduced Pressure Zone Device (RP)</p> <p>Reduced Pressure Principle Detector Assembly (RPDA)</p> <p>Double Check Valve (DC)</p> <p>Double Check Detector Assembly (DCDA)</p> <p>Other _____</p> <p>Existing Assembly Information (if applicable):</p> <p>Manufacturer _____ Model _____ Serial # _____</p> <p>Size ____ Type: RP DC DCDA RPDA</p> <p>Manufacturer _____ Model _____ Serial # _____</p> <p>Size ____ Type: RP DC DCDA RPDA</p>
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This handout is for informational purposes only and should not be relied on in place of official regulations and/or policies. The City of Pearland makes no representations, guarantees or warranties as to the accuracy completeness, suitability of information provided via this handout. Customers and citizens are personally responsible for complying with all local, state and federal laws.

Signature of person completing this survey:	Print name:	Date:
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