

# Customer Cross Connection and Backflow Protection Survey



Name:		
Company/Organization:		
Address of Premise Survey Relates to:		
City:	State:	Zip Code:
Phone:	E-mail:	
Meter No. (Provided on your water bill):	Premise No. (Provided on your water bill):	
Does this meter service multiple units? Yes <input type="checkbox"/> No <input type="checkbox"/> Type of units: Duplex <input type="checkbox"/> Apartment <input type="checkbox"/> Business <input type="checkbox"/> Mixed Use <input type="checkbox"/>		

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

<p><b>Please check ALL boxes that apply/best describe the use of water at your facility.</b></p> <p><input type="checkbox"/> Typical, such as bathrooms, drinking fountains, outside water faucets, household laundry or dishwashing appliances.</p> <p><input type="checkbox"/> Private well(s) supplying any part of your facility.</p> <p><input type="checkbox"/> Piped into a manufacturing process.</p> <p><input type="checkbox"/> Piped into a chemical process.</p> <p><input type="checkbox"/> Piped, underground lawn sprinkler/irrigation system.</p> <p><input type="checkbox"/> Piped into a swimming pool.</p> <p><input type="checkbox"/> Piped into water operated/cooled equipment/appliances/boilers.</p> <p><input type="checkbox"/> Medical, pathology, research chemical or bacteriological lab.</p> <p><input type="checkbox"/> Piped into photo processing lab.</p>	<p><b>Please check ALL types of backflow prevention devices installed on your plumbing system.</b></p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Residential Dual Check (RDC)</p> <p><input type="checkbox"/> Reduced Pressure Zone Device (RP)</p> <p><input type="checkbox"/> Double Check Valve (DC)</p> <p><input type="checkbox"/> Pressure Vacuum Breaker (PVB)</p> <p><input type="checkbox"/> Other _____</p> <p><b>Existing Device Information (if applicable):</b></p> <p>Manufacturer _____ Model _____</p> <p>Serial # _____</p> <p>Size _____ Type: (Circle) RP : DC : PVB : RDC</p>
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## FIRE PROTECTION SERVICES

<p><b>Please check ALL boxes that apply/best describe your fire protection account:</b></p> <p><input type="checkbox"/> This account serves private hydrants only (no fire sprinkler system in facility).</p> <p><input type="checkbox"/> This account serves an installed fire sprinkler system.</p> <p><input type="checkbox"/> Fire sprinkler system has outside fire department connections for pumping into system.</p> <p><input type="checkbox"/> Fire sprinkler system contains antifreeze or other chemicals.</p> <p><input type="checkbox"/> Fire sprinkler system is also supplied by an auxiliary source of water (i.e., pond, reservoir or storage tank).</p>	<p><b>Please check ALL types of backflow prevention devices installed on your sprinkler system.</b></p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Reduced Pressure Zone Device (RP)</p> <p><input type="checkbox"/> Reduced Pressure Principle Detector Assembly (RPDA)</p> <p><input type="checkbox"/> Double Check Valve (DC)</p> <p><input type="checkbox"/> Double Check Detector Assembly (DCDA)</p> <p><input type="checkbox"/> Other _____</p> <p><b>Existing Device Information (if applicable):</b></p> <p>Manufacturer _____ Model _____</p> <p>Serial # _____</p> <p>Size _____ Type: (Circle) RP : DC : DCDA : RPDA</p>
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If backflow prevention devices are installed on your plumbing/fire sprinkler system, it is required by the New Jersey Department of Environmental Protection that they be tested quarterly and copies of the test reports be maintained on file with the water company. If you do not have current copies of the test reports on file with us, please attach to this survey. Test report form can be found on NJ DEP's website at <http://www.nj.gov/dep/watersupply/forms.htm#phyconn>. Select Physical Connection Test & Maintenance report.

## SIGNATURE

Signature of person completing this survey:	Date:
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**Please return completed form:**  
 By Mail: New Jersey American Water  
 P.O. box 102  
 Bound Brook, NJ 08805  
 Attn. Environmental Compliance  
 Fax: 732 627 0868