

## **Cross-Connection Control Questionnaire for Commercial Fire Service**

Cross-connection control, also referred to as backflow prevention, protects the public water system from pollution and cross-contamination. It is the responsibility of the water purveyor as well as the Owner/Developer to prevent cross-contamination. Owner/Developer involvement and cooperation is vital to the success of this program.

To protect the public water supply from cross-connections, the California Department of Public Health (Title 17) and the Olivenhain Municipal Water District (Ordinance No. 429) require an approved backflow prevention assembly to be installed directly behind the water meter if an actual or potential cross-connection exists. This questionnaire will assist OMWD in assessing the type of backflow prevention assembly that will be required on the property.

OMWD may also request a questionnaire to be completed at a later date to confirm that no changes have been made to the plumbing system on the property.

To obtain information required for installation and testing of an approved backflow prevention assembly, please contact OMWD's Cross-Connection Control Coordinator at 760-632-4201.

Thank you for your help and cooperation with this vitally important issue.

## **Applicant Information**

(Please print)

| Customer/Applicant Name: |
|--------------------------|
| Parcel#:                 |
| . 4. 66.//.              |
| Service Address:         |
| Phone#:                  |
| Customer Account Number: |

1966 Olivenhain Road | Encinitas, California 92024 Phone 760-753-6466 | Fax 760-753-7610 | www.olivenhain.com

Please answer all questions on reverse and sign questionnaire.



## Important: answer all questions accurately and sign questionnaire.

| 1. Is the piping approved for potable water systems?  | ☐ Yes   ☐ No                         |
|---|--------------------------------------|
| 2. Is there a well or another water supply on the property?   | □ Yes   □ No                         |
| 3. Is there currently or any plans for future   |                                      |
| gray water use on your property?  | □ Yes   □ No                         |
| 4. Is there a tank or reservoir on the fire protection system?  | □ Yes   □ No                         |
| 5. Is there a fire department connection?   | □ Yes   □ No                         |
| 6. Is there any type of pump on the fire protection system?   | □ Yes   □ No                         |
| 7. Will any chemicals be added to the fire protection system  |                                      |
| (e.g., antifreeze, corrosion inhibitors, etc.)?   | □ Yes   □ No                         |
| 8. Is there currently or any plans for future   |                                      |
| recycled water use on the property?   | ☐ Yes   ☐ No                         |
| NOTE: Customers are required to notify OMWD in writing prior to responses to any of the questions above. By signing this form, to true and correct to the best of the applicant's knowledge.  |                                      |
| Signature:  | Date:                                |
| Print Name:   |                                      |
|   |                                      |
| THIS BOX TO BE FILLED OUT BY OLIVENHAIN MUNICIPAL Minimum level of protection required (listed in an increased Double check Valve Assembly(DC) Reduced Pressure Principle Backflow Prevention Education Air gap Separation(AG) X Cross-Connection Control Specialist No | sing level of protection) Device(RP) |
| Cross-Connection Control Specialist No.   |                                      |