

# Davidson Water, Inc.

## BACKFLOW PREVENTION SERVICE APPLICATION

Information on this form will be used to consider approval of the proposed backflow preventer (BFP) installation(s) required by the Davidson Water, Inc. cross-connection control policy. Providing inaccurate information or changes in water-use activities at the site may result in changing the BFP installation(s). Inadequate information will require the installation of a reduced pressure principle BFP. **If submitting plan drawings, this form must accompany the plans.** For assistance call the cross-connection control coordinator at (336)-731-5556.

PROJECT ADDRESS

Address \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_ Project Name & Description (i.e. Dale's Place - Shopping Center, Doctor's Office) \_\_\_\_\_

PROPERTY OWNER

FIRST \_\_\_\_\_ LAST \_\_\_\_\_  
COMPANY \_\_\_\_\_  
STREET \_\_\_\_\_ PHONE \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

INSTALLER

CONTACT PERSON (S) \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_  
COMPANY \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_  
STREET \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

YES or NO  
 YES  NO ARE TOXIC CHEMICALS USED IN YOUR OPERATION? EXPLAIN: \_\_\_\_\_  
 YES  NO ALTERNATE WATER SOURCE AVAILABLE? SOURCE: \_\_\_\_\_ USED FOR: \_\_\_\_\_

### LAWN IRRIGATION SYSTEMS

METER SEPARATE FROM DOMESTIC? YES or NO

Meter Size: \_\_\_\_\_ Check:  New or  Existing

YES or NO  
  Chemical Injection  
  Submerged Sprinkler Heads

### FIRE PROTECTION SYSTEMS

Metered? YES or NO Line Size: \_\_\_\_\_  
Check:  New or  Existing

YES or NO  
  Detector Meter  
  Hydrant(s) Only  
  Fire Sprinkler System  
  Fire Department Connection  
  Chemicals added in the System  
  Water Storage Tank or Reservoir

### COMMERCIAL ESTABLISHMENTS

Meter Size: \_\_\_\_\_ Check:  New or  Existing

YES or NO  
  Chemicals Added, Injected, or Aspirated Into the System (i.e. Sanitizer, Pool)  
  System Used to Mix Chemicals  
  Tanks, Lines, or Vessels Carrying Toxic Substances  
  Sewage Pump  
  Nonpotable Re-circulating Water System (i.e. Boiler, Cooling Tower, Chiller)  
  Booster Pump

All backflow preventers installed on the Davidson Water, Inc. system must be tested annually. All tests must be performed by an approved tester. (A list is provided at [www.davidsonwater.com](http://www.davidsonwater.com))

The undersigned hereby certifies that he/she is either the owner or the authorized agent of the owner, and hereby makes application for approval of the backflow preventer installation(s) described, and agrees to the terms of Davidson Water, Inc.'s cross-connection control policy, understanding that Reduced Pressure Principle backflow preventers are required to be installed above ground in an ASSE 1060 approved enclosure.

SIGNATURE OF APPLICANT

PRINT NAME & PHONE NUMBER

DATE