



Santa Fe Irrigation District

**POST OFFICE BOX
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CROSS CONNECTION CONTROL QUESTIONNAIRE

Backflow prevention and cross connection protection is the responsibility of the customer as well as the water purveyor. Your cooperation is vital to the success of this important program and to protect the potable water supply.

Complete this form when making application for water service. This questionnaire will become part of the District's customer application record as required in the rules and regulations of the District.

Pursuant to and in compliance with California Administrative Code Title 17 and District Administrative Code Article 27, approved backflow prevention devices shall be installed when a potential hazard of contamination or pollution to the District's water supply exists.

Information required for the installation or testing of an approved backflow device may be obtained through the District's Cross Connection and Recycled Water Technician. The District may also request a questionnaire to be completed at a later date to confirm no changes have been made to the property plumbing system. Additionally, all installations are subject to inspection and regulation by the District.

Please answer all questions and sign the questionnaire.

Thank you for your cooperation.

Regards,

Jeff Nightingale
Cross Connection and Recycled Water Technician
jnightingale@sfidwater.org
(858) 227-5768

Name _____

Service Address _____

Mailing Address _____

Telephone No. _____

Email Address _____

IMPORTANT: PLEASE ANSWER ALL QUESTIONS AND SIGN QUESTIONNAIRE

1. Is there a well or auxiliary water supply on the property? YES [] NO []

If YES, is the well or auxiliary supply connected onsite to the same line supplied by the District's potable meter? YES [] NO []

2. Is there any type of pump, lift station, low pressure broiler or cooling tower? YES [] NO []

3. Does the property have hazardous substances, a sewage treatment plant, reclaimed water or a grey water system? YES [] NO []

4. Will this service be used for agricultural purposes or as a dedicated irrigation water service? YES [] NO []

5. Will this property use a fertilizer injection system? YES [] NO []

6. Will this service strictly be used for fire protection? YES [] NO []

7. Does the property currently have a backflow device at the meter? YES [] NO []

8. Are anti-siphon devices installed on all hose bids? YES [] NO []

9. Is there a fire sprinkler system connected to the domestic water service line? YES [] NO []

Is, or will, this water service be utilized in any of the facilities listed below: YES [] NO []

(PLEASE CIRCLE ALL THAT APPLY)

1. Fire Protection
2. Agricultural
3. Governmental/Institutional
4. Medical or Dental
5. Educational Institute
6. Laboratory
7. Restaurant/Brewery
8. Multiple Family Housing
9. Industrial or Commercial
10. Mortuary
11. Ranch, Farm, Nursery
12. Pond, Fountain or Pool
13. Live Stock
14. Animal Care/Veterinarian
15. Commercial Irrigation

NOTE: If in the future you do install or create any of the above conditions, you will be responsible for notifying the District prior to implementation.

The District shall determine whether a backflow prevention assembly shall be installed. The customer shall bear all costs of the installation, maintenance and testing. The District must approve all backflow prevention assemblies. No water service connection shall be placed in service unless the District system is protected as required by state laws and regulations.

By signing this form, the applicant attests that all responses are true and correct to the best of the applicant's knowledge.

Signature: _____ Date: _____

Reviewed by: _____ Date: _____