

CROSS CONNECTION QUESTIONNAIRE FORM

Site Location: _____

1. Is this a residential or commercial property? Residential Commercial
If commercial, please specify business name: _____
2. Are you renting, or do you own this property? Rent Own
If renting, please provide name and address of owner:

3. Your water meter will serve how many homes? _____ How many buildings? _____
4. Will you have any of the following?
- | | | |
|---|------------------------------|-----------------------------|
| <input type="radio"/> Swamp cooler connected to piping | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Hot tub (fills with a hose or automatic filler) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Swimming pool | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Underground sprinkler system | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Drip irrigation system | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Greenhouse | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Solar water heating system | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Water makeup lines (boiler, hydronic heating) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Utility sink with threaded faucet (hose attachment) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Fire sprinkler system | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Unknown, unidentifiable or complicated piping | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
5. Will you use any of the following?
- | | | |
|---|------------------------------|-----------------------------|
| <input type="radio"/> Antifreeze flush kits with your automobile | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Insecticide sprayers (that attach to a garden hose) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Darkroom or photo developing equipment | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| <input type="radio"/> Fill adapters for waterbed, fish tank or other | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
6. Will anyone on the premises use a portable dialysis machine? Yes No
7. Will you have a bathtub or hot tub that fills from the bottom or does not have an overflow drain or the fill spout is not above the tub rim? Yes No
8. Will you have a water softener or any other water treatment system connected to your drinking water supply? Yes No
9. Will you have auxiliary water supply (i.e. well, pond) on your premises? Yes No
10. Will you have livestock (i.e., horses, cows, etc.) that use a water trough? Yes No

