CROSS CONNECTION QUESTIONNAIRE FORM

Sit	e Location:		
1.	Is this a residential or commercial property? Residential If commercial, please specify business name:	Commerci	al 🔲
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? Swamp cooler connected to piping Hot tub (fills with a hose or automatic filler) Swimming pool Underground sprinkler system Drip irrigation system Greenhouse Solar water heating system Water makeup lines (boiler, hydronic heating) Utility sink with threaded faucet (hose attachment) Fire sprinkler system Unknown, unidentifiable or complicated piping 	Yes Yes	No
5.	 Will you use any of the following? Antifreeze flush kits with your automobile Insecticide sprayers (that attach to a garden hose) Darkroom or photo developing equipment Fill adapters for waterbed, fish tank or other 	Yes	No No No No
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 <u>or</u> does not have an overflow drain <u>or</u> 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 🗌

11.	Is the water piping that enters your water meter?	home more than 10 feet above your	Yes 🗌	No 🗌	
12.	Does a creek, river, or spring run nea		Yes 🗌 Yes 🗍	No 🗌	
13.	Do you have a booster pump, well p water pump?	oump, or any other type of	Yes 🗌	No 🗌	
14.	Do you receive irrigation water from	n a different source?	Yes 🗌	No 🗌	
15.	Do you have a backflow preventer on your property now? If yes, where?		Yes	No 🗌	
16.	Do you have any situation that you a connection between your drinking w		Yes 🗌	No 🗌	
17.	Do you have any other water using ementioned above?	equipment on your property not	Yes 🗌	No 🗌	
Com	ments:				
remo	se notify the Town of Eatonville if any odeling, changes or additions to your vectors of Water Customer	of the above conditions change on you water piping system. Phone Number	r property su	ch as	
Print Your Name		Best time to call	est time to call or alternate contact		
Toda	y's Date				
Mailing Address:		Site Address (if d	Site Address (if different):		
	•	and return the questionnaire. This form uestions, please call us at 360-832-8524	•	n file at	
RETURN SURVEY REPORT FORM TO:		Town of Eatonville PO Box 309 /201 Center Street			

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Eatonville, WA 98328