

CITY OF PATEROS

113 Lakeshore Drive PO Box 8, Pateros WA 98846 Phone: 509.923.2571 E-mail: jwilson@pateros.us

CROSS CONNECTION QUESTIONNAIRE FORM

QUESTIONS	Yes	No
Is this property residential?	103	110
Is this property commercial or industrial?		
Are you renting?		
If renting, provide name and address of Owner:	.	
<i>6</i> , 1		
Owner Name:		
Address:		
City/State/Zip:		
Phone: Email:		
Your water meter serves how many: Homes Buildings	_	
Do you have any of the following?	Yes	No
Swamp cooler connected to piping		
Hot tub (fills with a hose or automatic filler)		
Swimming Pool		
Underground sprinkler system		
Greenhouse		
Solar water heating system		
Water makeup lines (boiler, hydronic heating)		
Utility sink with threaded faucet (hose attachment)		
Fire sprinkler		
Unknow, unidentifiable or complicated piping		
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Do you use:	Yes	No
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
Does anyone on the premises use a portable dialysis machine?		
Do you have a bathtub/jacuzzi that fills from the bottom or does not		
have an overflow drain or the fill spout is not above the tub rim?		
Do you have a water softener, or any other water treatment system		
connected to your drinking water supply?		
Do you have an auxiliary water supply such as a well?		
Do you have livestock (horse, cows, etc.) that use a water trough?		
Is the water piping that enters your home more than 10 feet above		
your water meter? (Such as those that live above Ives Street)		
Do you have a booster pump, well pump, irrigation pump or any		
other type of water pump?		
Do you receive irrigation water from a different source?		
Do you have a backflow preventer on your property now?		
If yes, where		
Do you have any situation that you are aware of that could create a		
connection between your drinking water and any other substance?		
Do you have any other water using equipment on your property not		
mentioned above?		
Comments:		
Please notify the City of Pateros if any of the above conditions change on your premodeling, changes, or additions to your water piping system.	roperty	such as
Signature of Water Customer Date Print your Name:		
CONTACT INFORMATION		
	Physical address of property:	
Mailing Address:		
City/State/Zip:		
Phone: Alternate Phone:		
Email:	_	_

RETURN SURVEY REPORT FORM TO: City of Pateros, Jord Wilson

In person/City Hall/drop box; 113 Lakeshore Drive By Mail: P.O. Box 8, Pateros WA 98846

By Email: jwilson@pateros.us