

Public Works – Cross Connection Program
1555 Empire Road ♦ Louisville, Colorado, 80027 ♦ Phone: 303-335-4785 ♦ Fax: 303-335-4781

Date of Inspection:  Name of Business:  Facility Address:  Mailing Address:  Mailing Address:  Note: A separate Cross-Connection Survey must be filled out for each service line.  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  DOMESTIC  Existing?  Pes No  Date of Installation:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  Date of Installation:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  FIRE SYSTEM  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  Comments:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  BY THE STAND STAND DEVICE INFORMATION  BY THE STAND DEVICE INFORMATION  BY THE STAND DEVICE INFORMATION  BY THE STAND DEVICE INFORMATION  COMMENTS:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  COMMENTS:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  OTHER  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  DATE OF THE STAND PROVIDED TO THE PREVENTION DEVICE INFORMATION  DATE OF THE STAND PROVIDED TO THE PROVIDED TO THE PROVIDED TO	Cross-Co	onnection Sur	vey		
Name of Business: Facility Address: Mailing Address: Contact Person: Phone: Email: Note: A separate Cross-Connection Survey must be filled out for each service line.  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  DOMESTIC Existing?	Date of Inspection:	Wa	ater Supplier:		
Facility Address:  Mailing Address:  Contact Person:  Phone:  Email:  Note: A separate Cross-Connection Survey must be filled out for each service line.  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  DOMESTIC  Existing?					
Mailing Address:  Contact Person:  Phone:  Email:  Note: A separate Cross-Connection Survey must be filled out for each service line.  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  DOMESTIC  Existing? □ Yes □ No Device Location:  Model:  Size:  Serial No.:  Is this service connection metered? □ Yes □ No Device Location:  Model:  Manufacturer:  Size:  Serial No.:  Is this service connection metered? □ Yes □ No Device Location:  Model:  Manufacturer:  Size:  Serial No.:  Is this service connection metered? □ Yes □ No Date of Installation:  Comments:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  FIRE SYSTEM  Existing? □ Yes □ No Date of Installation:  Comments:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  IRRIGATION  Existing? □ Yes □ No Device Location:  Model:  Manufacturer:  Size:  Serial No.:  Is this service connection metered? □ Yes □ No Date of Installation:  Comments:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  OTHER  Existing? □ Yes □ No Date of Installation:  Comments:  EXISTING BACKFLOW PREVENTION DEVICE INFORMATION  OTHER  Existing? □ Yes □ No Device Location:  Model:  Manufacturer:  Size:  Serial No.:  Is this service connection metered? □ Yes □ No Device Location:  Model:  Manufacturer:  Size:  Serial No.:  Is this service connection metered? □ Yes □ No Device Location:  Model:  Manufacturer:  Size:  Serial No.:  Is this service connection metered? □ Yes □ No Device Location:					
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Note: A separate Cross-Connection Survey must be filled out for each service line.    Existing BACKFLOW PREVENTION DEVICE INFORMATION	Contact Person:				
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Comments:    EXISTING BACKFLOW PREVENTION DEVICE INFORMATION	Size:	Serial No.:			
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OTHER       Existing? □ Yes □ No       Device Location:         Model:       Manufacturer:         Size:       Serial No.:         Is this service connection metered? □Yes □ No       Date of Installation:		EVICTING DACKELOW DD	EVENTION DEVICE INFORMATION		
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	Size:	Serial No.:			
Comments:	Is this service conne	ection metered?   PYes   No	Date of Installation:		
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EXISTING BACKFLOW PREVENTION DEVICE INFORMATION				
Type:	Existing?   Yes   No	Device Location:		
Model:	Manufacturer:			
Size: Serial No.:				
Is this service connection metered? □Yes □ No		Date of Installation:		
Comments:				
EXISTING BACKFLOW PREVENTION DEVICE INFORMATION				
Type:	Existing?   Yes   No	Device Location:		
Model:	Manufacturer:			
Size:	Serial No.:			
Is this service connection metered? □Yes □ No		Date of Installation:		
Comments:				
		EVENTION DEVICE INFORMATION  Device Location:		
Туре:	Existing?   Yes   No	Device Location.		
Model:	Manufacturer:			
Size:	Serial No.:			
Is this service connection metered? □Yes □ No		Date of Installation:		
Comments:				
EXISTING BACKFLOW PREVENTION DEVICE INFORMATION				
Type:	Existing? □ Yes □ No	Device Location:		
Model:	Manufacturer:			
Size:	Serial No.:			
Is this service connection metered? □Yes □ No		Date of Installation:		
Comments:				