

# Cross Connection Control Survey form for New Commercial Development or Commercial Remodel

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Part A – Complete and return to Ute Water Cross Connection Control Department along with a copy of the mechanical plans for the culinary drinking water, the irrigation system and the fire protection system. These must be provided before a tap can be purchased!

Name of Business: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Facility Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Owner/ Representative: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

**CIRCLE YES OR NO FOR EACH OF THE FOLLOWING CONCERNING THE FACILITY**

Auxiliary Water Supply	YES	NO	Off Street Fire Hydrant	YES	NO
Chemical Mixing Equipment	YES	NO	Potable Water Irrigation Sys	YES	NO
Livestock Watering	YES	NO	Swimming Pool/Spa	YES	NO
Fire Protection System	YES	NO	Solar Water Heating Equip	YES	NO
Chemical Additive Fire System	YES	NO	Waste Treatment Equipment	YES	NO
Water Storage Tanks	YES	NO	Food Processing/Preparation	YES	NO
Water Treatment Equipment	YES	NO	Frost Free Hydrant	YES	NO
Other (Please Explain)					

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

General Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Landscaping Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Fire Sprinkler System Installer: \_\_\_\_\_ Phone: \_\_\_\_\_

This Cross Connection Review form is a reference for the requirements of this office concerning this project. It is recommended that each contractor listed above be given a copy of this review form to avoid the wrong backflow prevention assemblies being installed.