

**MONTGOMERY COUNTY PUBLIC SERVICE AUTHORITY
CROSS CONNECTION CONTROL AND BACKFLOW PREVENTION - QUESTIONNAIRE FORM**

PLEASE PRINT

Property Owner:	Mail Address:	Service Address (if different from mail address)

Phone Number:		Account Number:	

Please review each of the items below and fill out the form where any of these conditions exist at the above mentioned service address. Sign, date and mail your response or hand deliver to the PSA office at 755 Roanoke Street - Suite 2-I Christiansburg, VA 24073. If you have questions on completing the form, please call 381-1997. THANK YOU.

	Yes	No		
1. Individual wells, springs or cisterns	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
2. Pressure booster pumps	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
3. Water Storage or Pressure Tanks	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
4. Outside Hose Connections	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
5. Swimming Pool	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
6. Lawn Irrigation System	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
7. Photo/Picture Developing	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
8. Water Treatment Systems (water softeners)	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
9. Utility Sinks with Hose Connections	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
10. Animal Water Troughs	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
11. Industrial Water Use	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, please include results of last device test with survey				
12. Boiler/Hydronic Heat	<input type="checkbox"/>	<input type="checkbox"/>		
If yes, method(s) of isolation from public water supply (include manufacturer, model & ASSE# where applicable):				
13. Household Dual-Check Backflow Prevention Device	<input type="checkbox"/>	<input type="checkbox"/>		
Manufacturer	Model	ASSE#	Install Date	Size

Signature: _____

Date: _____