

**ERIE WATER WORKS – Fire Protection / CROSS CONNECTION CONTROL SURVEY
For All Customers - (Must be completed with the Water Service Application)**

WATER SERVICE ADDRESS: _____

Property Owner Name / Business Name: _____

Property Owner Mailing Address / Zip: _____ Phone: _____

Property Type: Residential Multiple Unit (3 or more) Units on one connection.
(check one) Commercial Industrial Institutional (school, hospital, church, etc.)

Water fire service, Line Size: _____ Single Family Home system Multiple Units on one connection
Number of Units? _____ Other, describe use: _____

Do you have or will have installed at your property. (Check all that apply)

- Fire suppression connected to the potable water.
- Fire sprinkler system. Containing one or more of the following:
 - A private Fire Hydrant on your property
 - A foam fire system
 - A chemical system
 - A dry fire System
 - A wet system
 - A dry fire hydrant connected to some source of non potable water
 - A Siamese fitting connected to your facility
 - A booster pump on the fire system
 - An elevated tank on your property dedicated to fire suppression
 - An existing well on the same property

Does a creek, spring, or river run near or through your property? Yes No

If yes, do you pump or draw water from this source for fire protection? Yes No

Do you have a booster pump, dedicated to fire suppression? Yes No

Do you have a backflow preventer(s) on your property now? Yes No

If yes, where? _____ Fire Line Domestic Boiler Feed

If yes, list the following: Make _____ Model _____ Size _____ Serial # _____

Do you have any situation that you are aware of that could create a cross-connection? Yes No

Comments: _____

Print Name _____ Signature _____ Phone _____ Date _____

Please notify Tamara Squire 870-8000 Ext. 207 if any of the above conditions change.
Return to: Erie Water Works Engineering Department, 240 West 12th Street, Erie, PA 16501, Fax 870-8011
Email: engineeringervices@eriewaterworks.org

SURVEY MUST BE COMPLETED AT TIME OF APPLICATION