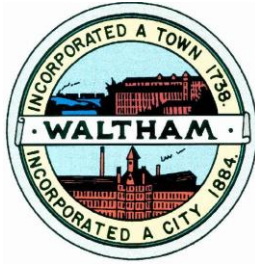


CITY OF WALTHAM
Water & Sewer Division
Office of CPW



Jeannette A. McCarthy
Mayor

Michael Chiasson
CPW Director

**CROSS CONNECTION CONTROL PROGRAM
DESIGN DATA SHEET AND PLUMBING PLAN**

I. NAME: _____

ADDRESS: _____

CONTROL NUMBER: _____

PHONE #: _____ E-MAIL: _____

II. FACILITY:

NAME: _____

ADDRESS: _____

CONTACT PERSON: _____ PHONE: _____

NEW / ADDITION / OR EXISTING FACILITY: _____

GENERAL DESCRIPTION OF FACILITY: _____

III. DESIGN DATA:

MANUFACTURER: _____ MODEL: _____

TYPE: _____ RPZ: _____ DCVA: _____ PVB: _____

SIZE: _____ GATE TYPE: _____

ELEVATED TEMPERATURE DEVICE (Y/N): _____

LOCATION: _____

LOCATION OF POTABLE WATER LINE: _____

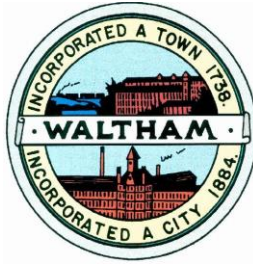
BY-PASS ARRANGEMENT (Y/N): _____

FROM WHAT TYPE OF CONTAMINATION IS THE WATER SUPPLY PROTECTED? _____

HOW MANY OTHER RPZ, DCVA, AND PVB BACKFLOW DEVICES ARE LOCATED IN THIS

BUILDING?: _____ RPZ(s) _____ DCVA(s) _____ PVB(s) _____

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IV. DEVICE MAINTENANCE AND TESTING SCHEDULES:

Describe the maintenance and testing schedule of the above device (s). Please refer to 310 CMR 22.22:

V. CROSS CONNECTION PLAN SUBMITTAL REQUIREMENTS:

Details must be provided to include at a minimum the following criteria:

A. PLUMBING PLAN

1. Completed Title Block (Name, Address, Date, Preparer, Scale, etc.)
2. Schematic of plumbing system (at least 8 ½ " x11") showing accepted symbols and nomenclature, detailing:
 - a. Clearances of device installation.
 - b. Location of upstream and downstream shutoff valves.
 - c. Make, Model, Size and Alignment of device.
 - d. Location of Potable Water Lines.
 - e. System, source or equipment fed downstream of device, complete with information on the secondary system (operation pressure, chemicals, etc.)
 - f. Engineer, Plumber, _____w/License #_____

SUBMITTED BY: _____

ADDRESS: _____

DATE: _____ PHONE: _____

OWNER/AGENT SIGNATURE: _____

Send completed application to: City of Waltham CPW Department
Cross Connection Control Program
169 Lexington Street
Waltham, MA. 02452

Please send an e-mail response to: Gerard Shaughnessy at: gshaughnessy@city.waltham.ma.us