

Cross-Connection Control Checklist

Please complete and return to:
 Three Lakes Water Association
 P.O. Box 24, Snohomish, WA 98291
 360-568-8022

Name: _____ Phone: _____ Acct #: _____

Parcel #: _____ Site Address: _____

Please mark yes for any of the following you have or will be installing:

1. Automatic sprinkler or irrigation system: Yes No

***If yes to the above, please provide a design or actual maximum instantaneous demand of irrigation system: _____ (gallons per minute).**

***Not all water systems are designed to handle automatic sprinklers, irrigation systems or fire flow demands.**

2. Swimming pool: Yes No

3. Hot tub: Yes No

4. Livestock watering troughs: Yes No

5. Residential fire sprinkler or suppression system: Yes No

6. Drafting from a lake or from any other source for the purpose of lawn irrigation or any other use: Yes No

7. Solar heating: Yes No

8. Photo developing: Yes No

9. Water treatment system (such as a water softener): Yes No

10. Grey water system (such as reclaiming wash water): Yes No

11. Water supply to a dock or boat moorage: Yes No

12. Greenhouse: Yes No

13. Private well: Yes No

14. Septic pump: Yes No

15. Boiler: Yes No

16. Medical equipment connected to water supply: Yes No

17. Post-mix soda dispenser: Yes No

18. Decorative ponds: Yes No

19. Dialysis: Yes No

20. Hydronic Systems (radiant heat in floors and or walls): Yes No

21. Any other device that will be connected to the potable water supply: Yes No

***If yes to the above, please provide an explanation on the back of this page.**

*If yes for any of the above questions, the following items will be enforced without exception. All existing members will be phased in over a period of time on an individual basis. This checklist must be completed and returned by all members.

1. Irrigation systems require a minimum protection of a double check valve assembly; the other items may require a higher level of backflow protection. Contact the Association for specific requirements.
2. The backflow assembly must be installed by the property/homeowner or by a licensed plumber per the Association standards.
3. The backflow assembly must meet all AWWA and State standards. It must also appear on the most recent Washington Department of Health list of approved assemblies. Contact the Association or Washington Department of Health at 1-800-525-2536 for a list of approved assemblies.
4. Assemblies shall be tested by a State certified Backflow Assembly Tester (BAT) immediately after installation, relocation or repair. An annual test shall be performed thereafter. All results shall be reported to the Association within thirty (30) days of the completed test.
5. The Association can provide a list of certified Backflow Assembly Testers (BATs).
6. The cost of installation, relocation, annual inspections and repairs is the responsibility of the property/homeowner. Please call the Association for inspection after installing a backflow assembly.
7. The homeowner understands that after the installation of a water meter, the Association may conduct an on-site inspection of the property and/or building for potential cross-connections. If a cross-connection is discovered, the Association will require the installation of a State-approved backflow assembly.

Homeowner Signature: _____

Date: _____

***If new construction or no site address is available, please provide a parcel/tax ID number.**