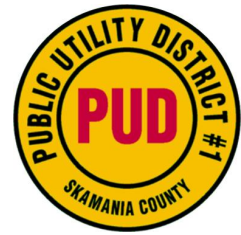


Cross Connection Control Survey



Please fill out one survey form for each PUD water meter on your property.
Customers with more than one water meter will need to fill out more than one survey.

1. Physical address: _____
street city state zip
2. Mailing address: _____
street city state zip
3. Property type: Residential Commercial (business name: _____)
4. Occupancy: Own/buying Renting*
*If Renting, Owner's name: _____ Phone: _____
Owner's mailing address: _____
5. This meter serves (check all that apply):
 Home Out Building Business Water Trough Other _____
6. Do you have any of the following served by this water meter (check all that apply):
 Drip Irrigation system Fire sprinkler Swimming pool Underground sprinkler system
 Solar system Waterbed Duck or fish pond Well point for irrigation
 Swamp cooler Auxiliary well Hot tub/Jacuzzi Outside RV connection
 Utility sink with threaded faucet Greenhouse Ghost pipes (unidentified piping)
7. Do you use (check all that apply):
 Antifreeze flush kits Insecticide sprayers (that attach to garden hose)
 Darkroom equipment Portable dialysis machine
8. Do you have a bathtub that fills from the bottom or tub that does not have an overflow drain and not air gapped? Yes No
9. Do you have a water softener or any other treatment system connected to your drinking water supply?
 Yes No
10. Do you have an auxiliary (secondary) water supply on your premises? Yes No
11. Do you have livestock and use a water trough? Yes No
12. Is your home or building elevated above your water meter? Yes No
13. Does a creek, river or spring run near your property? Yes* No
*If yes, do you pump or draw water from this source? Yes No
14. Do you have a booster pump, well pump or any other type of water pump? Yes No
15. Do you receive irrigation water from a different source? Yes No Does not Apply
16. Do you have a backflow preventer on your property now? Yes* No Unsure
*If yes, where: _____
17. Do you have any situation that you are aware of that could create a cross connection? Yes* No Unsure
*If yes, please explain: _____
18. Do you have any other water-using equipment on your property not mentioned above? Yes* No
*If yes, please explain: _____
19. Your Name: _____ Phone: _____
Signature: _____ Today's Date: _____
20. Your PUD Account Number (leave blank if unknown): _____

Contact Skamania PUD at 509-427-5126 if any of the above conditions change. Thank You! **Please return using the email link below or mail to Skamania PUD, PO Box 500, Carson, Wa 98610.**