

SOOS CREEK WATER AND SEWER DISTRICT

PLEASE RETURN THIS COMPLETED FORM TO: Development@sooscreek.com

Single Family Commercial/Industrial Fire/Hydrants

Received On:

Multi-Family Irrigation/ Backflow Meter Size

Permit Number:

Received By

Abandonment

Today's Date _____ Tap Application number _____

Project Name _____ Lot # _____ Parcel # _____

Business Name _____

Business Type _____

Physical Property Address _____

City _____ State _____ Zip code _____

Billing Contact/Owner _____

Billing Address _____

City _____ State _____ Zip code _____

Contact Person _____ Phone Number _____

(1) Please indicate if your facility has, or will have, any of the following: **All items must be answered for permit approval**

Is your residential fire sprinkler system is a FLOW – THROUGH SYSTEM 13 OR 13D	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

	Yes	No		Yes	No
Air conditioning system	___	___	Chemical feed tank for industrial process	___	___
Air Washer	___	___	Chemical feed (<i>commercial cleaners</i>)	___	___
Aquarium make-up water	___	___	Chlorinators	___	___
Aspirator, chemical (<i>Herbicide, pesticide, weedicide</i>)	___	___	Computer cooling lines	___	___
Aspirator, Medical / Lab	___	___	Condensate tanks	___	___
Autoclave	___	___	Cooling towers	___	___
Autopsy Table	___	___	Decorative ponds	___	___
Auxiliary Water System (<i>Well, pond, creek, other</i>)	___	___	Degreasing equipment	___	___
Baptismal fountain	___	___	Dental equipment / cuspidors	___	___
Bathtub, below rim filler	___	___	Dialysis equipment	___	___
Bedpan washer	___	___	Dye vats and tanks	___	___
Beverage dispenser (<i>post-mix Co2</i>)	___	___	Etching tanks	___	___
Boiler feed lines	___	___	Fermenting tanks	___	___
Bottle washing equipment	___	___	Fertilizer injection	___	___
			Film processors	___	___
			Fire Department pumper connections	___	___

	Yes	No		Yes	No
Box hydrant (<i>irrigation</i>)	___	___	Fire System (<i>with booster pump</i>)	___	___
Building three or more stories tall	___	___	Fire System (<i>w/o chemicals</i>)	___	___
Car Wash	___	___	Fire System (<i>with antifreeze or chemicals</i>)	___	___
			Livestock drinking tanks	___	___
Garbage can washers	___	___	Make-up tanks	___	___
Heat exchangers	___	___	Photo developing sinks / tanks	___	___
(<i>Other than double wall w/leak path</i>)			Pump prime lines	___	___
Heat pumps	___	___	Radiator flushing equipment	___	___
High pressure washers	___	___	Recreational vehicle sewage dump	___	___
Hot tubs (direct water connection)	___	___	Sewer connected equipment	___	___
Hot water heating boilers	___	___	Solar water heating system	___	___
Hydrotherapy baths	___	___	Spas	___	___
Ice makers	___	___	Steam generating equipment	___	___
Industrial fluid systems	___	___	Stills	___	___
Irrigation system (<i>no chemicals</i>)	___	___	Swimming Pools	___	___
Irrigation system (<i>chemicals</i>)	___	___	Trap primers	___	___
Laboratory equipment	___	___	Used, reclaimed or gray water system	___	___
Laundry machines (<i>commercial</i>)	___	___	X-ray equipment	___	___

2) Are you aware of any existing backflow prevention located at this property?

Please describe: _____

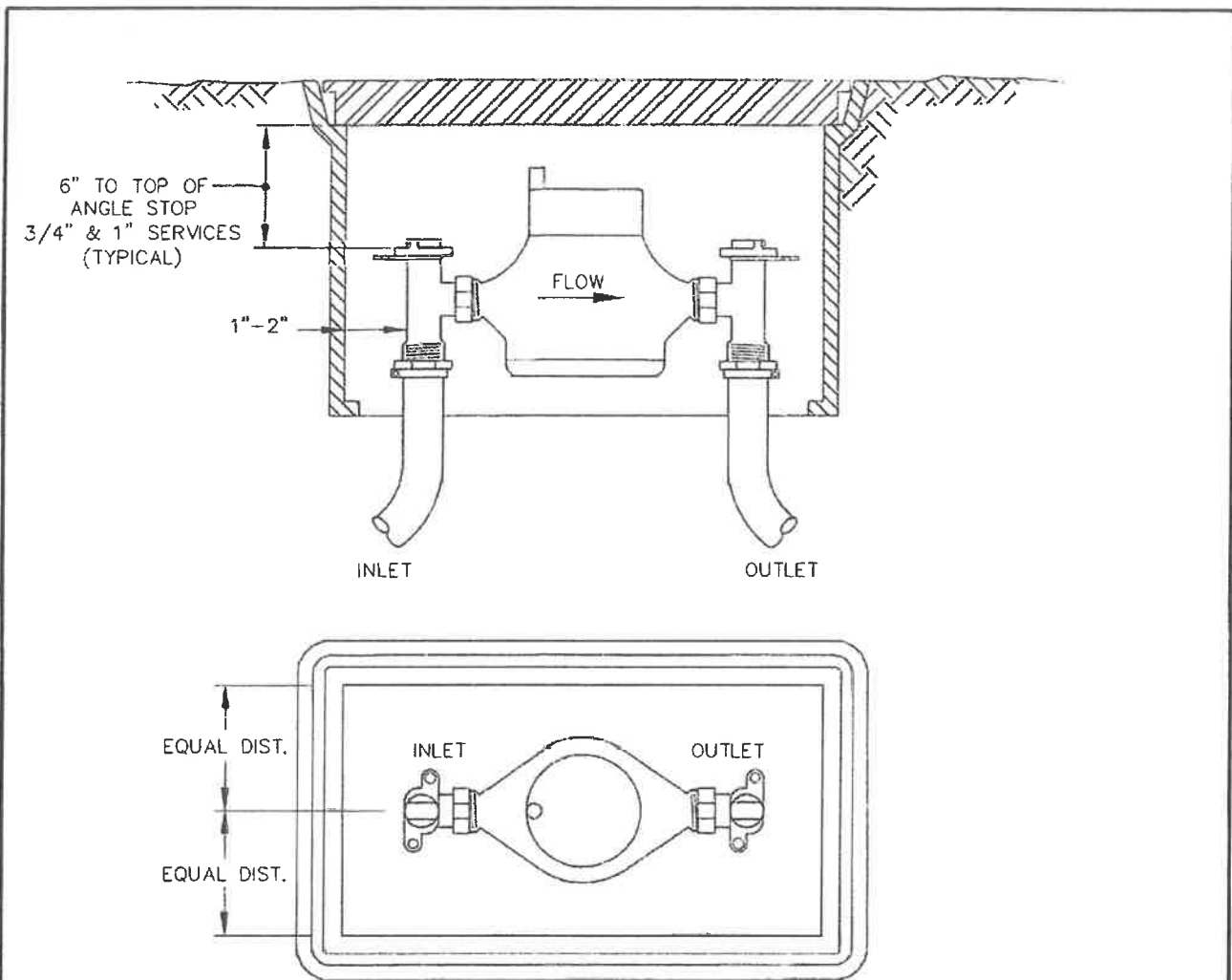
3) Please provide the name of all products or chemicals that are mixed with water at your location:

4) Please provide the name of all products or chemicals that are stored in bulk at your location:

Name of person completing this form: _____

THIS SECTION TO BE COMPLETED BY SOOS CREEK CROSS-CONNECTION CONTROL SPECIALIST

TYPE OF WATER USE	HAZARD ASSMNT		BACKFLOW PROTECTION REQUIRED			
	LOW	HIGH	NONE	DCVA	RPBA	RPDA
DOMESTIC						
IRRIGATION						
FIRE						
STATUS OF METER	METER IS SET			OK TO INSTALL UNLOCKED		
				LOCKED PER WATER QUALITY		
CERTIFIED BY						
DATE						



NOTES:

1. THE ANGLESTOPS MUST BE EQUAL DISTANCE FROM THE LONGITUDINAL SIDES OF THE METER BOX. THE TOP OF THE ANGLESTOPS MUST BE 6" BELOW THE BOTTOM OF THE METER BOX LID. THE ANGLESTOPS MUST BE BETWEEN 1" AND 2" FROM THE LATITUDINAL END OF THE METER BOX AND MUST BE VERTICAL (90°) TO GROUND LEVEL.
2. THE ANGLESTOP CONNECTION ON THE CUSTOMER'S SIDE OF THE METER MUST REMAIN IN A VERTICAL POSITION AFTER THE CONNECTION TO THE CUSTOMER'S LINE HAS BEEN COMPLETED.
3. THE METER BOX MUST REMAIN FREE OF FOREIGN MATERIAL SUCH AS CONCRETE & ITS BY-PRODUCTS
4. METER BOX SUPPLIED BY DEVELOPER/CONTRACTOR. METER BOX SHALL BE PER STANDARD DETAILS W-17 AND W-18.

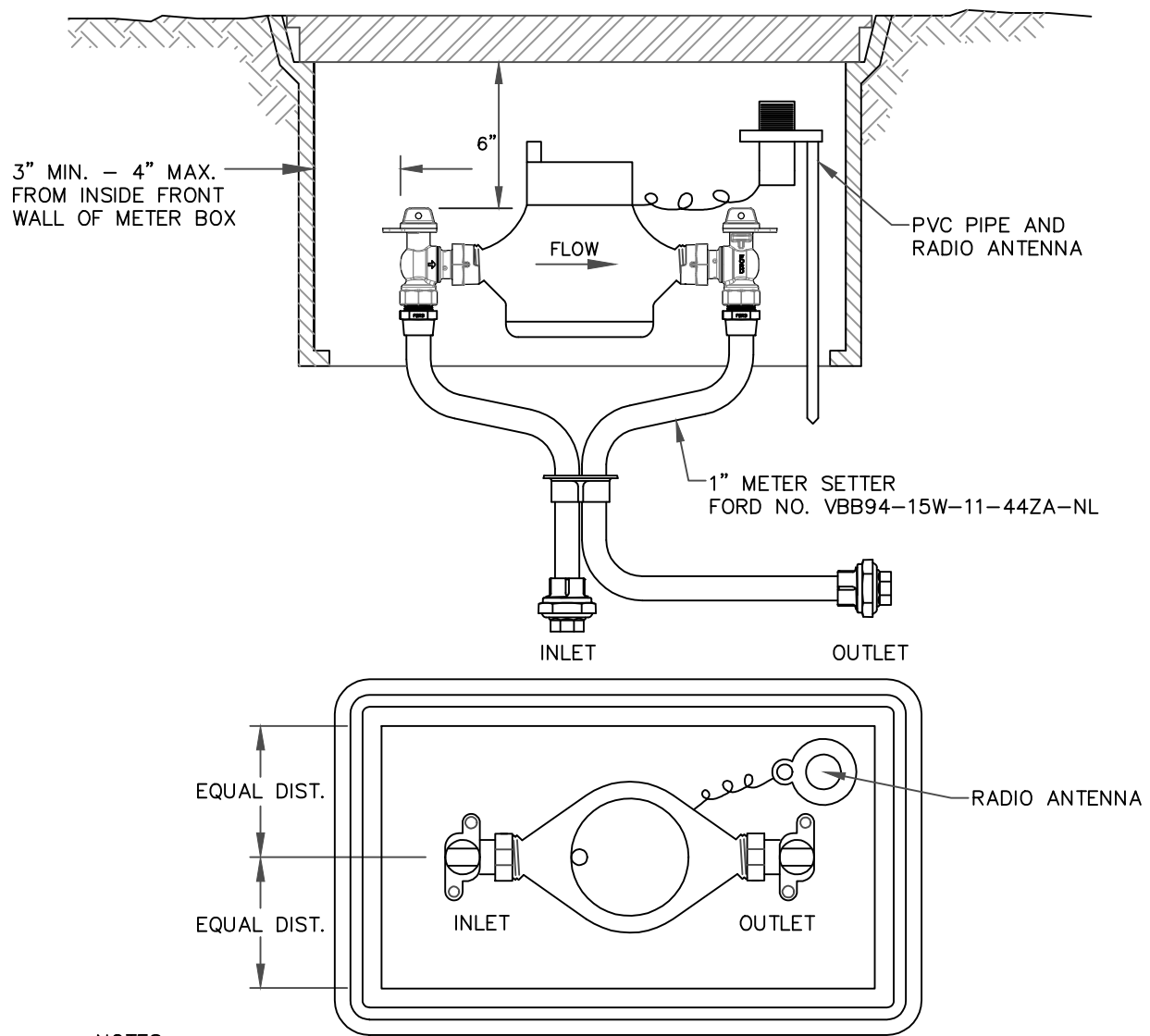
By signing this specification for Soos Creek Water & Sewer District I acknowledge I have reviewed this and will ensure the meter is installed to meet these requirements

Signature _____ Date _____



METER INSTALLATION

REVISION DATE	9-23-14	SCALE	NTS	DISTRICT APPROVAL	K.V	DATE APPROVED	SEPTEMBER 23, 2014	
FILE NAME	R:\CAD\DETAIL\AUTOCAD\SOOSCRK\WATER\W-19						DWG. NO.	W-19



NOTES:

1. THE METER SETTER MUST BE EQUAL DISTANCE FROM THE LONGITUDINAL SIDES OF THE METER BOX. THE TOP OF THE METER SETTER MUST BE 6" BELOW THE BOTTOM OF THE METER BOX LID. THE METER SETTER MUST BE BETWEEN 3" AND 4" FROM THE LATITUDINAL END OF THE METER BOX AND MUST BE VERTICAL (90°) TO GROUND LEVEL.
2. THE METER SETTER MUST REMAIN IN A VERTICAL POSITION AFTER THE CONNECTION TO THE CUSTOMER'S LINE HAS BEEN COMPLETED.
3. THE METER BOX MUST REMAIN FREE OF FOREIGN MATERIAL SUCH AS CONCRETE & ITS BY-PRODUCTS.
4. METER BOX SUPPLIED BY DEVELOPER/CONTRACTOR. METER BOX SHALL BE PER STANDARD DETAIL W-18.



METER INSTALLATION

REVISION DATE JUNE 9, 2022	SCALE NTS	DISTRICT APPROVAL G.G.H.	DATE APPROVED
FILE NAME		DWG. NO.	W-19