

**Village of Caseyville
Water/Sewer Department**

Service Address: _____

Billing Address: _____

Customer Name: _____

Cross-Connection Control Survey

Type of Use: Residential Commercial Medical Industrial
 Governmental Agricultural Other _____

1. Do you have any other source of water, such as private well, pond, lake, tank, or reclaimed water that is connected to the public water supply? Yes No
2. Are there any backflow prevention devices installed on the premises? Yes No
 This does not include devices installed on the Village water meter or outside water/garden hose.
 If so, has the device been tested? n/a Yes No
 If yes, please provide a copy of the test results.
3. Do you have a permanent in-ground lawn irrigation system installed on your property? Yes No
4. Do you have a sump pump on your property? Yes No
 If so, does it connect to the Village sewer? n/a Yes No
5. Do you have a swimming pool and/or hot tub? Yes No
 Is the above filled by a permanent connection to the water system? Yes No
 (Mark "No" if filled by a garden hose.)
6. Is your residence heated by a boiler? Yes No

7. Do you have any of the equipment listed below on the premises? (Check all that apply)

- | | | | | | |
|-------------------------|-------|-----------------------------|-------|-----------------------------------|-------|
| Fire sprinkler system | _____ | Truck or tank filling equip | _____ | Baptismal fount/tub | _____ |
| Temporary service | _____ | Soft drink dispenser | _____ | Water softener | _____ |
| Car wash facilities | _____ | Water cooled equipment | _____ | Shampoo bowl | _____ |
| Chemical feeder | _____ | Pressure booster | _____ | Dishwasher | _____ |
| Soap injector | _____ | Sterilizer | _____ | Bathtub | _____ |
| Industrial fluid system | _____ | Photo Processor | _____ | Outdoor Hydrant* | _____ |
| Steam equipment | _____ | | | *stands upright out of the ground | |

Commercial Properties Only

Single family residential locations, please skip questions 8 and 9.

8. Do you have industrial air conditioning equipment on the premises? Yes No
 a. If so, does the equipment have an air washer on the premises? Yes No
 b. If so, does the equipment have a condenser washer on the premises? Yes No
9. Do you have an industrial grease trap on your property? Yes No
 If so, where is the grease trap located? _____

Important Notice

The Illinois Environmental Protection Agency and the Illinois Department of Public Health require hose vacuum breakers be attached to all outdoor faucets. These devices protect the plumbing system from being contaminated by any substance which might enter the water hose (lawn fertilizer, herbicide, soap, etc.) Hose vacuum breakers are available at most hardware stores or through your local plumbing contractor.

Comments

Your feedback is important in the cross-connection control program. Please use the space below for comments:

Service Line Survey

The Water Department is required to track and keep records of the type of service lines coming into your home. Please identify which type of material your water line is made of:

- Copper (copper colored, but could be a greenish color due to corrosion and oxidation)
- Plastic (white PVC or beige CPVC)
- Galvanized (silver or painted)
- Lead (dull gray, but shiny silver when lightly scratched with a knife, screwdriver or key)

The information provided in this survey form is an accurate and current description of the water system at this address.

Signature of person completing this survey

Date

Office Use:

Signature of person reviewing survey _____ Date _____