



Commercial/Industrial Service Application and Backflow Survey

Please complete this form and return it to our Customer Center at 6125 East Highway 20, Lucerne, CA 95458, or by mail to P.O. Box 1133, Lucerne, CA 95458. If you have any questions, please call us at (707) 274-6624. Thank you.

CUSTOMER INFORMATION

Customer name _____ Date _____
 Service address _____ City _____
 Contact name (if different from above) _____ Tax ID _____
 Mailing address _____
 Phone _____ Alternate phone _____
 E-mail address _____ Start Date _____

May we e-mail backflow-related notices? Yes No

PROPERTY INFORMATION *(please check one)*

What type of property is this? Commercial Industrial
 Is there an irrigation system (sprinklers) on the property? Yes No
 Is there a boiler on the property? Yes No
(sealed vessel where water is converted to steam; does NOT refer to water heaters)
 Is there a cooling tower on the property? Yes No
(cooling system used for industrial purposes to cool hot water; does NOT refer to air-conditioning unit)
 Are there four or more stories in the building? Yes No If yes, how many? _____
 Is there fire protection (sprinklers) and/or private hydrant(s) on the property? Yes No
 Is there existing backflow protection on the property? Yes No
 Is there a well, non-potable or recycled water, grey or rain water recovery on your property? Yes No
 Do you store hazardous chemicals on-site? Yes No If yes, what? _____
 Is there equipment that requires the use of water? Yes No If yes, please explain. _____

Are there multiple service lines supplying this property? Yes No

Please describe the type of business activity conducted on this property: _____

I confirm that the information provided above is true and correct, and that I have the authority to respond as the customer of record.

Signature _____ Print name _____

OFFICE USE ONLY			
Account No. _____	Meter No. _____	Size _____	
Number of service lines _____	Additional services lines: <input type="checkbox"/> Irrigation <input type="checkbox"/> Fire protection		
Reviewed by (print) _____	Signature _____	Date _____	
Backflow protection required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type _____		