

To prevent contamination of the public water supply, state plumbing codes require that all cross-connections in your plumbing system be disconnected, or protected with the appropriate backflow prevention device(s).

On the back side of this letter is a Cross-Connection Hazard Survey which is required to be completed and returned to Poweshiek Water Association within 30 days. Please return one survey for each service account you have with PWA. All internal cross-connections need to have the appropriate protection installed for isolation. Poweshiek Water Association will notify you if any containment devices will need to be installed.

Water quality is important to all of our customers and we appreciate your assistance in helping us maintain a safe drinking water supply. If you have any questions about cross-connections or backflow, please contact your plumber, certified backflow device tester, or Poweshiek Water Association.

Sincerely,

Kent Campbell

Distribution Supervisor

P.S. You can send the survey back with a water payment. Please remember to write the account to which the survey corresponds on the survey itself. Thank you.

DEFINITIONS:

Backflow: The undesirable reverse of flow of used water, contaminants or pollutants into a public drinking water supply as a result of a cross-connection.

Backflow Preventer: A device or process that prevents impurities or contaminants from being drawn into the public drinking water supply.

Cross-Connection: Any actual, or potential, connection between a public water supply and a source of contamination or pollution, such as plumbing connected between a well and rural water, or a hose submerged in a tank.

Air Gap: The physical separation between the free flowing discharge end of a potable water supply pipeline and an open or non-pressure receiving vessel. An approved air gap shall be at least double the diameter of the supply pipe, measured vertically above the overflow rim of the vessel, in no case less than 1".

CROSS-CONNECTION HAZARD SURVEY

Please look over your plumbing at your service connection(s) and answer these questions.

THANK YOU FOR HELPING US FULFILL THIS STATE OF IOWA HEALTH REGULATION.

TYPE OF WATER USE: Residential ___ Commercial ___ Medical ___ Agricultural ___ Governmental ___
Industrial ___ Other _____

Is there any other source of water, such as a private well, at this address? YES ___ NO ___

DO YOU HAVE ANY OF THE FOLLOWING?

Automatic Livestock waterers or tank fillers YES ___ NO ___

Boiler -- Hot Water or Steam YES ___ NO ___

Heat Pump YES ___ NO ___

Hose aspirator (for spraying chemicals) YES ___ NO ___

Are any pumps hooked to plumbing? YES ___ NO ___

If yes, which kind? (check all that apply)

Pressure booster ___ Fountain ___ Boiler Circulator ___ Sewage ___ Other (please specify) _____

Swimming pool or hot tub YES ___ NO ___

Truck or tank water filling station or pipe YES ___ NO ___

Underground lawn sprinkler systems YES ___ NO ___

Water Cooled Equipment YES ___ NO ___

Water Storage Tank YES ___ NO ___

List all other operating processes connected to the water piping. _____

Can you think of any other connections at your service address where chemicals or used water comes in direct contact with the water supply pipe? YES ___ NO ___ If yes, list _____

Backflow prevention devices must be approved by Poweshiek Water Association and tested by an Iowa Dept. of Public Health certified tester.

The Iowa Dept. of Public Health requires that all testable backflow preventers be tested annually. PWA is required to keep records of these tests and will issue reminder notices when testing is due.

Service Address & Account Number _____

TO MY KNOWLEDGE, THESE ANSWERS ARE CORRECT.

Name (please print)

Date

Signature

Daytime phone number

Please return completed survey to:

Poweshiek Water Association
P.O. Box 504
Brooklyn, Iowa 52211