

BACKFLOW - SELF ASSESSED SURVEY

TO BE COMPLETED BY PROPERTY OWNERS

City of Hamilton Backflow Prevention Program 330 Wentworth Street North Hamilton, Ontario L8L 5W2

PW-WW-CS-F-013-004 - Rev #8.2

Date of Survey: (mm/dd/yy)

It is an offence under the Backflow Prevention By-law to submit a Self Assessed Survey form that contains inaccurate or false information. Please complete the information below as requested in accordance with the Backflow Prevention By-law #10-103

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|---|----------------------------------|--------------------------------|---|--|--|--|--|
| lf y | our property or building has m | nore than one business located | on it, this survey must be completed for each business loc | cated on your property. | | | |
| 1 | Facility or Business Name: | | | | | | |
| 2 | Facility or Business Address: | Street #: | Street: | Postal Code: | | | |
| 2 | | City: | | Phone #: | | | |
| | Property Owner Information: | Name: | Email: | | | | |
| 3 | | Street #: | Street: | Postal Code: | | | |
| | | City: | | Phone #: | | | |
| 4 | Contact Person if Different that | an Owner - Name: | Email: | Phone #: | | | |
| PR | OPERTY OWNER'S SIGNATUR | E: | DATE: | | | | |
| 5 | Select your facility type f | rom the list below. 🏈 | | | | | |
| | Animal feed lot or anim | nal stock yard: | Fish farm or fish hatcheries | Plating shop | | | |
| Aquaculture farm Aquarium (public) | | | Food processing plant | Power generating facility | | | |
| | | | Garbage transfer facility | Printing plant | | | |
| Asphalt plant | | | Hospital | Pulp and/or paper plant | | | |
| Beverage processing plant (includes distillery and brewery) | | | Laboratory | Recycling facility | | | |
| | | | Laundry facility | Refinery, petroleum processing | | | |
| | Blood clinic | | (commercial only not coin operated) | Research facility | | | |
| Campsite with RV hook-ups or dump-stations | | | Marina (pleasure boat) | Sewage dump station | | | |
| Carwash | | | Meat packing plant | Sewage treatment plant | | | |
| Chemical plant | | | Medical clinic (surgical) | Steel manufacturing plant | | | |
| Concrete plant | | | Milk processing plant | Veterinary clinic | | | |
| Dental surgery facility | | | Mining facility | Waste disposal plant | | | |
| Dock and marine facility | | | Mortuary or morgue | Wastewater facility | | | |
| Dry cleaning plant | | | Oil refinery | Wastewater pump station | | | |
| Dye plant | | | Paint manufacturing plant | Wastewater treatment plant | | | |
| Exhibition grounds | | | Petroleum processing or storage facility | Water filling station | | | |
| Film or photo processing facility (that uses chemicals) | | | Pharmaceutical manufacturing facility | Water treatment plant | | | |
| | | | Plastic manufacturing plant | Water treatment pump station Zoo | | | |
| lf | If you HAV | E checked off any of the above | ntinue to fill out the remaining pages and submit all 3 we properties or facility types, then you are not required to comply with the Backflow Prevention By-law. Please subm | pages to the address at the top of the page. complete any more | | | |

| 6 | Indicate the serial number of your water meter as listed on your Alectra utility bill under "Meter Number" beside "Water". Serial Number: | | | | | | | | |
|----|---|---|--|---|--|--|--|--|--|
| 7 | Indicate the size of your City water meter located on your water service line e 0015 0016 0020 | ntering your building or property a 0025 | as listed on your Alectra utility bill 0038 | l under "Meter Type" beside "Water". | | | | | |
| 8 | Describe the size and type of your water service line entering your buildi | ng or property using the measu | uring tape provided on page 4. | | | | | | |
| | 15mm 17mm 20mm 25mm 38mm | Greater than 38mm | Service type: Copper | Iron | | | | | |
| 9 | Describe the type of business activity below (please be specific, i.e. dry cleaner, shoe retailer, dental office, pet store, real estate office, variety store, hair dresser, etc | | | | | | | | |
| | | | | | | | | | |
| 10 | Does your building or property have a separate water service line for a Fire Suppression System (sprinklet heads for fire)? | | es No If your property or building has a fire supression system, Yes No does it contain any chemicals or additives other than water: | | | | | | |
| 11 | Please list any other equipment or process connected to your water service | line that uses City water that ha | s not been indicated on page #3 | 3 (Water use information) of this form. | | | | | |
| | For Office use Only: TRN # | Degree of Hazard: | Backflow Device required: | Date C.C.C.S Form received: | | | | | |
| | Comments: Is this building or property required to comply at this time. | Moderate | Yes RP | | | | | | |
| | Yes No | High | No DCVA | | | | | | |

Step 6 & 7
Example from
Alectra Bill

| Sei | rvice | Meter | From | То | # Days | Previous Reading | Current Reading | Read Type | Multiplier | Usage | Adjustment Factor | Adjusted Usage |
|-----|--------|------------|------------|------------|--------|---------------------|--------------------|--------------|------------|-------------|----------------------|-------------------|
| Ele | ectric | HZN6065174 | 01/27/2019 | 03/06/2019 | 38 | 97714.00 | 98322.00 | Actual | 1.00 | 608.000 KWH | 1.037900 | 631.043 |
| Wa | /ater | 71147383 | 01/24/2019 | 03/06/2019 | 41 | 1955.00 | 1979.00 | Actual | 1.00 | 24.000 M3 | | |

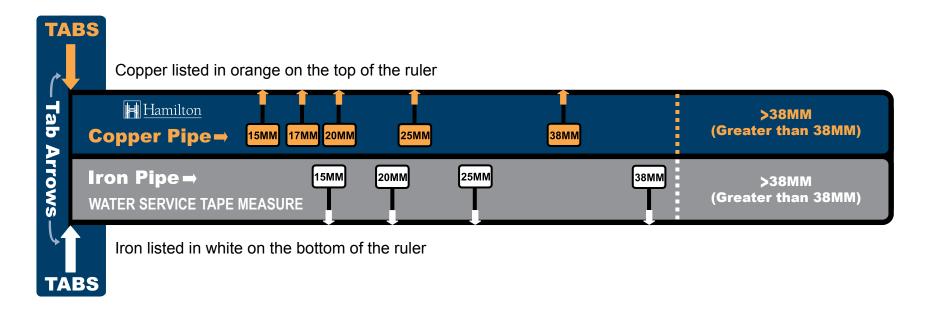
Your Water/Wastewater Charges: Residential

Water Meter Size - 16 mm

Any personal information on this form is collected under the authority of By-law No. 10-103 and will be used for the protection of the City of Hamilton's Water Distribution System from reverse flow. Information collected for the Backflow Prevention Bylaw will be stored on servers located in Canada and the United States, and may be subject to Canadian and/or American laws. Questions about the collection of this information should be directed to City of Hamilton, Backflow Prevention Program. 330 Wentworth Street North Hamilton, Ontario L8L 5W2. backflow@hamilton.ca

| Water Use Information 🏈 | | | | | | | |
|---|-----|----------|--|--|--|--|--|
| | YES | NO | If you answered yes to | | | | |
| Does the building or property use City water in any manufacturing, industrial or process applications? If yes, please specify how it is used: | | | any of these questions and a Backflow Device is present, enter device type from selection below | | | | |
| Does the property use any hazardous or toxic materials or chemical that has a connection to the City water supply? | | 1 | | | | | |
| Do any hot water boilers, steam boilers, heat exchangers exist on the property? If yes, does any of this equipment use chemical additives? | | | | | | | |
| Does your property have a lawn irrigation system that uses any type of chemical injection? | | | | | | | |
| Does your property have any type of water supply other than the water supplied in the City? | | Ì | | | | | |
| Does your property have any cooling towers or chillers? | | Ì | | | | | |
| Are there any solar heating systems on the property? | | | | | | | |
| Is there any autopsy or mortuary equipment of any kind located on your property? | | | | | | | |
| Is there a kitchen hood (canopy washer) with a direct City water supply connected to the washer located on your property? | | 1 | | | | | |
| Do you have any type of automatic chlorinating/de-chlorinating equipment on your property? | | | | | | | |
| Do you have any water cooled equipment on your property with a solenoid valve after the compressor (walk-in cooler, ac units)? | | 1 | | | | | |
| Are there any industrial wahsing machines located on your property (anything other than a coin-operated laundromat)? | | 1 | | | | | |
| Is there any type of dental or surgical equipment with a connection to internal water piping located in your Building? | | 1 | | | | | |
| Do you have type of food processing equipment on your property that is directly connected to your City Water supply? | | 1 | | | | | |
| If yes, please specify how it is used: | | <u> </u> | | | | | |
| Do you supply any type of dockside facilities (water supply to any type of pleasure craft)? | | | | | | | |
| Is there any type of photo processing equipment located on your property that is connected to your City water supply? | | | | | | | |
| Do you have any type of water re-circulating system on your property? | | | | | | | |
| Do you use any type of degreasing equipment that is connected to the City water supply on your property? | | | | | | | |
| Is there a power washer with chemical additives on your property? | | | | | | | |
| Do you use any type of automatic chemical dispensers? | | | | | | | |
| Do you have any type of garbage washing or garbage disposal equipment that has a City water supply connected to it? | | | | | | | |
| Is there any commercial ice making equipment located on the property? | | | | | | | |
| Do you have any livestock equipment with a connection to your City water supply? | | | | | | | |
| Do you have any type of radiator flushing equipment? | | | | | | | |
| Is your property equipped with any type of sewage pump that is connected to your City water supply? | | | | | | | |
| Do you have any type of wash tanks on your property that are connected to your City water supply? | | | | | | | |
| Do you use City water to supply any type of water hauling equipment? | | | | | | | |
| Does your property have any x-ray equipment? | | | | | | | |
| Device Selection for Property/Building Cross Connections found: DCAP - Dual check valve type with atmospheric port LFVB - Laboratory faucet type vacuum breaker HCVB - Hose connection type vacuum breaker AVB - Atmospheric type vacuum breaker RSCV - Resilient seated check valve RPDA - Reduced pressure detector assembly DCDA - Double check detector assembly DCVA - Double check valve assembly PVB - Pressure type vacuum breaker RP - Reduced pressure principle type RPDA - Reduced pressure detector assembly DCDA - Double check detector assembly PVB - Pressure type vacuum breaker N - None | | | | | | | |

Step 8Water Service Tape Measure



Directions for using the Water Service Tape Measure

- 1: Cut out the tape measure
- 2: Find your water service pipe where it enters your building/property
- 3: Hold "TABS" tight against the water service pipe
- 4: Wrap the measuring tape around the pipe
- 5: Line up "Tab Arrows" with the closest Copper or Iron MM arrow
- 6: Indicate this MM number and type of pipe above in Step 8