

# Application For Approval of Backflow Prevention Devices

**PRINT OR TYPE ALL ENTRIES EXCEPT SIGNATURES**

Please complete items 1 through 12a + Block and Lot Numbers

Block #	Lot #	FOR DEPARTMENT USE ONLY Log No.
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1. Name of Facility		2. City, Village, Town		3. County NASSAU	
4. Location of Facility street		city	state	zip	
4a. Phone Numbers		Contact Person			
5. Approx. Location of Device(s)			6. Mfg. Model #		Size of Device(s)

# of Fire Services	# of Domestic Services	# of Combined Services	Total # of Services	Total # of Buildings
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7. Name of Owner		Title	Phone Number		8. Nature of works <input type="checkbox"/> Initial Device Installation <input type="checkbox"/> Replace Existing Device 8a. <input type="checkbox"/> New Service <input type="checkbox"/> Existing Service 8b. <input type="checkbox"/> New Building <input type="checkbox"/> Existing Building <input type="checkbox"/> Major Renovation
Full Mailing street Address		city	state	zip	
Owner's Signature		Date m / d / y			

9. Name of Design Engineer or Architect			10. NYS License #		
Address street			<input type="checkbox"/> PE <input type="checkbox"/> RA <input type="checkbox"/> Other		
city			10a. Telephone Number(s)		
state			zip		
signature			Date m / d / y		

11. Water System Pressure (psi) at Point of Connection Max <u>85</u> Avg <u>70</u> Min <u>20</u>		12. Estimate Installation Cost	12a. Estimate Design Cost
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13. Degree of Hazard <input type="checkbox"/> Hazardous <input type="checkbox"/> Aesthetically Objectionable	List of processes or reasons that lead to degree of hazard checked: ..... .....
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14. Public water supply name <b>WEST HEMPSTEAD WATER DISTRICT</b>		Name of supplier's designated representative <b>CROSS CONNECTION CONTROL</b>	
Mailing address street <b>575 BIRCH STREET</b>		Title	
city <b>WEST HEMPSTEAD, N.Y. 11552</b>		Signature* _____ m / d / y	
Telephone No. <b>(516) 483-1180</b>		Date _____ <i>Your signature endorses proposal</i>	

Note: All applications must be accompanied by plans, specifications and an engineer's report describing the project in detail. The project must first be submitted to the water supplier, who will forward it to the local public health engineer. This form must be prepared in quadruplicate with four copies of all plans, specifications and descriptive literature.