Table 1 - Cross Connection Control Survey Form

Cross Connection Control Survey Form - General Please note: required upgrades should be completed prior to submitting this survey. This may require obtaining a building permit.	CITY OF Guelph Making a Difference
Included with this form: ☐ Appendix "A" Additional Cross Connections ☐ Appendix "B" Dental Office ☐ Appendix "C" Restaurant ☐ Appendix "D" Mortuary ☐ Appendix "E" Hospital/Nursing Home	**Date:**
Occupant: Address:	Phone: Email:
Owner: Address:	Phone: Email:
Qualified person: Company:	Phone: Email:
Building use:	**Facility ID number:**
Degree of hazard: **Size, type & serial number of Premise Isolation:** ☐ Minor ☐ Moderate ☐ Severe	**Bypass (Parallel) device** ☐ Yes ☐ No **Size, type & serial number:**
Does building have a designated process line: ☐ Yes ☐ No **Protection - Size, type and serial number:**	**Bypass (Parallel) device:** ☐ Yes ☐ No **Size, type and serial number:**
Is all non-potable pipe labeled: ☐ Yes ☐ No ☐ N/A	

Cross Connection Control Survey Form - General

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Does building have a Fire Sprinkler System: ☐ Yes ☐ No **Chemical addition:** ☐ Yes ☐ No	**Protection: (Size, type and serial number):**
Washrooms – total number: **Toilets – total number:** **Chemical addition:** ☐ Yes ☐ No **Protection:** ☐ AVB ☐ Other	**Basins – total number:** **Protection:** ☐ Air gap ☐ Other
Urinals – total number: **Chemical addition:** ☐ Yes ☐ No **Protection:** ☐ Air gap ☐ AVB	
Floor drains – total number: **Location:**	**Are floor drains primed:** ☐ Yes ☐ No

Table 2 - Confirmation of devices and required upgrades

Facility address:		**Facility ID number:**	**Size, type, serial number**	**Required upgrade completed and date**
Lunchrooms/cafeterias	**Coffee machines** ☐ Yes ☐ No	**Direct water connection** ☐ Yes ☐ No	**Protection:**	

Facility address:		**Facility ID number:**	**Size, type, serial number**	**Required upgrade completed and date**
Vending machines	☐ Yes ☐ No	**Direct water connection** ☐ Yes ☐ No	**Protection:**	
Mop sinks ☐ Yes ☐ No	**Total number:**	**Chemical dispenser** ☐ Yes ☐ No	**Protection:**	
Laundry tubs ☐ Yes ☐ No	**Total number:**	**Chemical dispenser** ☐ Yes ☐ No	**Protection:**	
Boiler make-up water	☐ Yes ☐ No	**Chemical addition** ☐ Yes ☐ No	**Protection:**	
Chiller make up water	☐ Yes ☐ No	**Chemical addition** ☐ Yes ☐ No	**Protection:**	
Irrigation	☐ Yes ☐ No	**Chemical addition** ☐ Yes ☐ No	**Protection:**	
Pressure washer	☐ Yes ☐ No	**Aspirator** ☐ Yes ☐ No	**Protection:**	
Chemical dispenser	☐ Yes ☐ No		**Protection:**	
Garbage wash down	**Number and location:**	**Degree of hazard: Severe**	**Protection:**	
Humidifier	**Chemical addition:** ☐ Yes ☐ No	**Degree of hazard:** ☐ **Moderate** ☐ **Severe**	**Protection:**	

Survey completed on:

FULL DISCLOSURE REQUIRED: this form is intended to assist the Qualified Person in carrying out a survey and is not to be construed as addressing all potential cross connection situations. It is the responsibility of the owner or building occupier to bring to the attention of the Qualified Person all water uses within the premises to permit inspection for potential cross connections and recommendation of corrective actions.

Cross connections not identified in the survey may be deemed as works carried out subsequent to the survey in violation of the Building Code and Backflow Prevention Bylaw.

All selections shall be made in accordance with the Backflow Prevention By-law and current edition of CSA B64-10

Note: Surveyor is required to submit copies of this report to City of Guelph and owner of property. List additional cross connections on applicable appendices (i.e.: hose bibs, eye wash stations, laundry machines etc.)

Owner/occupant	**Qualified person**
Name (please print): _____	**Name (please print):**
Signature: _____	**Signature:**

Collection of Personal Information
Personal information is being collected and will be used for the purposes of verifying property ownership and to communicate with the owner/occupant/qualified person. Personal information, as defined by Section 2 of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), is collected under the authority of the Municipal Act, 2001, and in accordance with the provisions of MFIPPA.

If you have questions about the collection, use or disclosure of this personal information please call 519-822-1260 extension 2349 or email privacy@guelph.ca.

Alternate formats are available as per the Accessibility for Ontarians with Disabilities Act by contacting Building Services at 519-837-5615 or building@guelph.ca. TTY 519-826-9771.