The Madison Suburban Utility District Of Davidson County, Tennessee Water System Cross Connection Questionnaire Survey

*Name				
*Service Address				
1) Occupancy:	Own _	Rent		
2) Meter serves		v Many? How Many?		
3) *Do you have	a Hot Tub? Yes_	No		
4) *Do you have	a swimming pool	? YesNo		
5) *Do you have	a Jacuzzi? Yes	No		
6) *Do you have	a waterbed? Yes	sNo		
7) *Do you have	a Solar System?	YesNo		
8) *Do you have	a Green House?	YesNo		
9) *Do you have	an underground :	sprinkler system?	? YesNo	
10)*Do you have	darkroom equipm	nent? Yes	No	
11)*Do you have	a drip/soaker/irriç	gation system? Y	/esNo	
12)*Do you have i	nsecticide spray	ers that attach to	a garden hose? Yes_	No 13)
10)Do you have a	utility sink with a	a threaded faucet	? YesNo	_
14)*Do you have	a wood burning h	not water heater?	YesNo	
15)*Do you have	a portable dialysi	is machine? Yes	No	
16)*Do you have	a bathtub that fills	s from the bottom	n? Yes No	
17)*Do you have a	a water softener	or any extra wate	er treatment system?	Yes No
18)*Do you have a	an auxiliary wate	r supply on your	premises? Yes	No
19)*Do you have l water? Yes		e a water trough o	or water system conne	ected to by public
20)*ls your home	or building elevat	ted above your w	ater meter? Yes	_ No
21)*Does a creek,	river, or spring v	water run near or	on your property? Ye	s No
22)*Do you have a	a booster pump?	Yes No_		
23)*Do you have a	a well pump? Ye	s No	_	
24)*Do you have a	any other type of	water pump? Ye	es No	
25)*Do you receiv	e irrigation water	from a different :	source? Yes N	lo
26)*Do vou have a	a backflow proted	ction device on vo	our property now? Yes	s No

Yes No	you are aware of that could create	e a cross-connection?
28)*Do you have any other water-us Yes No	sing equipment on your property n	not mentioned above?
If yes, please list below.		
Print Name*	Phone #*	
Signature*	Date*	
	Email Address	•

*Required fields

Please notify this office if any of the above conditions change.