

Appendix B – Request for Waiver

**City of Lynchburg Backflow Prevention Control Program  
Waiver Request for Alternate Installation Location**

Applicant: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Installation Address: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

**Project information (if applicable):**

Project Name: \_\_\_\_\_ Project No: \_\_\_\_\_

Project Location: \_\_\_\_\_

Project Engineer: \_\_\_\_\_ Telephone No: \_\_\_\_\_

**Detailed description of waiver request (attach drawing if applicable):**

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**Justification / Reason for Request:**

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**City of Lynchburg’s Compliance Specialist’s Comments:**

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**City of Lynchburg Technical Review Representative’s Comments:**

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\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved \_\_\_\_\_  
Director / Asst. Director of Water Resources Date