



# Backflow Survey

Please complete the following in its entirety and submit it to The Dept. of Water Resources. It may be faxed to 434-455-1277, or e-mailed to [angela.hefner@lynchburgva.gov](mailto:angela.hefner@lynchburgva.gov). Once this information has been reviewed, we will let you know what backflow prevention measures are needed. Please contact The Dept. of Water Resources at 434-455-4250 if assistance is needed, or visit us at 525 Taylor St., Lynchburg, VA 24501.

**§ 39-98, City Code. Requirements for backflow and cross-connection control.**

Every building and structure shall be constructed, equipped and maintained to prevent the pollution of the city's water supply from cross-connection, backflow or back-siphonage of liquids. (Ord. No. O-03-112, 6-10-03, eff. 7-1-03)

Please note: There is no "grandfather" clause with regard to this code. Renovations, Additions, Expansions, and New Construction shall comply, as shall any service connection which the [Dept. of Water Resources](#) determines has hazard(s) that need either an initial or an updated level of backflow prevention. Service connections shall not be utilized until the requisite backflow prevention assembly(s) are installed and appropriately tested; this includes, but is not limited to, service connections being used for demolition, construction, or landscaping purposes, whether the service is permanent or temporary.

Please check or circle the correct response or provide us with the information requested. If added space is needed, please use a 2nd form.

1. Please note the types and sizes of active water connections to the property, as well as any services being considered for the future.

EXISTING SERVICE TYPE(S)	CHECK ALL THAT APPLY	QUANTITY PER TYPE	IS BACKFLOW INSTALLED?	PROPOSED SERVICE TYPE(S)	CHECK ALL THAT APPLY	QUANTITY PER TYPE	PROPOSED BACKFLOW
DOMESTIC				DOMESTIC			
FIRE				FIRE			
IRRIGATION OR RELATED				IRRIGATION OR RELATED			

- 2. Does the property have any secondary water sources, such as wells, springs, or holding tanks? YES NO Unsure
- 3. Will the site be used for any of the following: commercial, institutional, industrial, governmental, medical/dental, or similar? YES NO Unsure  
If yes, please specify: \_\_\_\_\_
- 4. Does the property have a fire sprinkler system or private fire hydrant(s), or do any need to be installed with this project? YES NO Unsure
- 5. If a fire sprinkler system exists or is being considered, will any portion of the system include additives? YES NO Unsure
- 6. Does the property have an irrigation, or irrigation-related system (or yard hydrant); is one being considered for this project? YES NO Unsure
- 7. Does any part of the structure(s) on the property measure more than 30 feet in height from the lowest level? YES NO Unsure
- 8. Are pumps currently being used on any part of the plumbing system or might they be needed with this project? YES NO Unsure
- 9. Are chemicals used for any process, prep, washing, or system on site which is connected to any portion of the plumbing? YES NO Unsure

Comments/Other Information: \_\_\_\_\_

Information of individual completing questionnaire:

I, (print name) \_\_\_\_\_, acting on behalf of (print firm name) \_\_\_\_\_ do, hereby certify and acknowledge that I have reviewed, understand and will comply with the [City of Lynchburg's Backflow Prevention Program](#), to include the [City Manual of Specifications](#), and [VA DPOR Board for Contractor regulations](#) in accordance with the aforementioned City Code.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Site Name & Address: \_\_\_\_\_ Site Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_