



APPENDIX "B"
TO BY-LAW NUMBER 2007.87
CROSS CONNECTION SURVEY DATE :(MM/DD/YY) _____

Facility:		Address:			Owner:			Report Given To:	
Surveyor:		Certificate #:			Phone #:				
	Location of Cross Connection	Existing Protection Type	Serial #	Date of Last Test (If applicable)	Acceptable Protection Yes/No	Required Upgrade	Selection From	Remarks	
1.									
2.									
3.									
4.									
5.									
6.									
<u>Selection from:</u> S-CAN/CSA B64 Selection Guide P-Professional Engineer (Attach selection documentation) M-Manufactured Supplied Device			<u>Device Type:</u> AG – Air Gap *AVB-Atmosphere Type Vacuum Breaker *DCAP-Dual Check Valve Type with Atmospheric Port *DCVA-Double Check Valve Assembly Type *DUC-Double Check Valve Type *DUCV-Dual Check Valve Type with Intermediate Vent HCVB-Hose Connection Type Vacuum Breaker			<u>Device Type:</u> *LACV-Listed Alarm Check Valve LFVB-Laboratory Faucet Type Vacuum Breaker N-None *PVB-Pressure Type Vacuum Breaker *RSCV-Resilient Sealed Check Valve *RP-Reduced Pressure Principle Type * Building permits are required for installation or replacement of these devices			
All selections shall be made in accordance with the Township of Ramara Backflow Prevention By-law requirements – The Township has jurisdiction over all selections. Note: Surveyor required to submit copies of this report to the Chief Building Official of the Township of Ramara and owner of property within the specified time period.									