

CITY OF DEFIANCE - Water Division
1356 Baltimore Street
Defiance, OH 43512-1904
419-782-1886 Fax: 419-782-6510

Customer Water Use Survey

Site Address

Mailing Address

Daytime Phone Number _____ This is a Home, Work, or Cell number

The water department is conducting a survey of all water customers to protect the water supply for all citizens. This information will be used to prevent possible contamination. Contamination can occur due to cross-connections between the water supply and potentially hazardous sources. If a cross-connection is found to exist, appropriate corrective action will need to be taken. Please return this completed survey to our office. If you have questions or would like assistance in completing this survey, please call. Thank you for your cooperation.

1. Which best describes your facility:

- Residential Medical Agricultural
 Commercial Multi-family Other _____
 Industrial Governmental

2. Number of Units: _____

3. If not residential, what is your specific type of business? (e.g. restaurant, veterinary, hospital, retail, office, etc.)

4. Do you have an irrigation system? Yes No Unknown

5. Do you use water from another source? Yes No Unknown

If yes, specify source _____ (e.g. well, pond, lake, canal, tank, cistern, etc.)

6. Do you have any water using equipment? Yes No Unknown

- Irrigation Boiler
 Process water Water powered sump pump
 Fire Protection Other(s) _____

7. Do you have a fire protection system? Yes No Unknown

8. Do you have a backflow preventer? Yes No Unknown

To the best of my knowledge, the information provided in this survey is accurate:

Signature

Print Name

Date

This form reviewed by:

UBO/Building Inspection/Engineering

Date

Water Division

Date