



DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATER & SEWER OPERATIONS

FORM FOR BACKFLOW PREVENTION DEVICE EXEMPTION

-- One Domestic Service Only --

Form for Backflow Prevention Device Exemption for a Facility with One Domestic Service Only

If the facility meets ALL of the conditions that are stated in the sample letter below, TYPE a letter on your letterhead giving us all of the information shown on the sample letter. Do not omit any of the points. Submit to the Cross-Connection Control Unit for approval. NOTE: Where we show (bracketed italicized items), you must provide the appropriate information for your facility.

PE / RA / LMP LETTERHEAD

(Date)

DEP Bureau of Water & Sewer Operations
Cross-Connection Control Unit
59-17 Junction Blvd. 3rd Floor Low-rise
Flushing, NY 11373

Re: Backflow Prevention Device exemption for a
Facility with a domestic service only
(Address)

Block: Lot: County:

Gentlepeople:

Based on the information provided below we respectfully request a review of the (existing building with existing service, existing building with new service, building being renovated, future building) with regards to backflow prevention requirements.

The referenced location (is/will be) (residential/commercial/educational/industrial/etc.), and (is/will be) supplied by only one service for domestic purposes, which is (size) inch and no fire services. (Describe building and occupancy in detail. Include number of floors and, if residential, the number of units.)

The facility (does/will) NOT contain any of the following:

- BAKERY
BIDETS
CAR WASH
CHEMICALS USED IN PROCESSING e.g.
DYE PLANTS, PHOTO LABORATORIES
COMMERCIAL LAUNDRY FACILITIES WITH 2 OR MORE
COIN OPERATED MACHINES
DELICATESSEN /PREMISES WHERE FOOD IS BEING PREPARED
DENTAL OFFICES /LABORATORIES
DISTILLED BREWERIES
FUNERAL PARLORS
GREENHOUSES
IN-GROUND IRRIGATION SPRINKLER
WELLS (GROUNDWATER)
MULTIPLE WATER SERVICES
SEWAGE TREATMENT OR HANDLING
VETERINARY OFFICES / LABORATORIES
WAREHOUSES (WITH TOXIC CHEMICALS STORAGE)
WATER REUSE / RECYCLING
MEDICAL OFFICES / LABORATORIES
(INCLUDES PSYCHOLOGY & PSYCHIATRIC OFFICES THAT ADMINISTER MEDICATION)
AUTO BODY / REPAIR SHOPS
BEAUTY SALONS OR BARBER SHOPS
BUTCHERS (INCLUDES FISH MARKETS & LIVE STOCK)
CHEMICALLY TREATED BOILERS
DRY-CLEANING ESTABLISHMENTS
COMMERCIAL KITCHENS / RESTAURANTS
LARGE BOILERS (MORE THAN 350000 BTU)
BOOSTER PUMPS
HOTELS AND/OR MOTELS
GAS STATIONS AND/OR MINI MARTS WITH SODA MACHINES OR COFFEE LINES
HEAT EXCHANGERS WITH WATER (SINGLE WALL)
PHARMACY
PRESSURE TANKS
PRIVATE WELLS
SWIMMING POOLS / COMMERCIAL SWIMMING POOLS
METAL MANUFACTURING, CLEANING, PROCESSING OR FABRICATING PLANTS
WATER COOLED EQUIPMENT OR CHILLERS
WATER STORAGE TANKS

Based on this information and a detailed and thorough inspection of the (existing building/plans), we believe this building is non-hazardous and does not require a backflow prevention device. We are fully aware that if any of the above conditions change, the installation of an appropriate backflow prevention device may be mandatory.

Property Owner's Name
Property Owner's Mailing Address
Owner's Phone Number
Owner's Signature

PE/RA or Plumber's Name:
License Number: (if not on letterhead)
Phone Number: (if not on letterhead)
PE/RA or LMP Seal & Signature