



## MAINTENANCE AND FIELD-TESTING OF BACKFLOW PREVENTION DEVICES

**Water services over 25mm (1 inch) – moderate – severe hazard**

Date:
Customer Name:
Customer Address:
Customer Address:
Inspection Date:
Size of Backflow Device:
Location of Backflow in Building:
Inspection Company:
Inspection Company Address:
Inspector Name:
Inspection Reports to be submitted to Petrolia Water Department – Director of Operations within five (5) days of the inspection.
If Backflow Device passes inspection – no further action required for one year
If Backflow Device fails inspection the device must be repaired or replaced within five (5) working days.



### Hydrant Use Permit

Permit Fee \$85.00

Permit Fee includes \$65.00 for Inspection and \$20.00 for Administration

Date Use Requested For:
Purpose of intended Use:
Job Name:
Attach copy of Backflow Prevention Device calibration in last 12 months:
Starting Meter Reading:
Ending Meter Reading:
Total Water Used in cu m:
Name of Company:
Address:
Address:
Name of Responsible Person:
Contact Phone Number:
Note: Town of Petrolia – Water Department must be scheduled to inspect and install the Backflow device.
Contact the Water Department at 519-882-2350