



NOTICE TO FACILITY OWNER & INSTALLER

Each Backflow Device being installed requires a completed Backflow Prevention Device Design Data Sheet (Prior to any Device Installations). This Data Sheet is available at the Dracut Water Supply District office or online at www.dracutwater.com under Rates, Fees and General Information.

Important Installation Requirements:

To avoid having to remove and re-install any device, be sure that the device is installed in the following manner by a Licensed Plumber.

1. Before installing any device, all pipelines shall be thoroughly flushed to remove foreign matter.
2. Devices shall be located so as to permit easy access and provide adequate and convenient space for maintenance, inspections, and testing.
3. Once we have approved your Device Design Data Sheet, you may install the device.
4. Once the device has been installed, you must schedule an appointment with our office for an inspection.
5. Depending on the type of device installed, it is subject to either annual or semi-annual testing by DWSD's licensed backflow contractor and billed accordingly.
6. Refer to Mass DEP Cross Connection Control Regulations (310 CMR 22.22) for additional information and requirements. <https://www.mass.gov/regulations/310-CMR-2200-drinking-water>



Design Data Sheet

1. **Owners name** _____

Address _____

Telephone # _____

2. Facility

Name _____

Address _____

Contact person/agent: _____

Telephone # (Facility or Contact) _____

New Facility: ____ Existing Facility: ____ Property Rehabilitation: ____

General description of the type of business or activities conducted at this facility:

3. Device Data:

Manufacturer: _____ Model#: _____ Size: _____

RPBP _____ DCVA _____ PVB _____ Serial # _____

Hot or cold water unit _____ By-Pass arrangement: YES ____ NO ____

Location of device within the premises: _____

Type of Shutoff valve: _____ UL or FM approval*: YES ____ NO ____

From what type of contamination is the water supply protected: _____

How many other RPBP or DCVA are located on the premises: _____

*Gate Valves for Fire Systems must be UL- or FM- approved

4. *Piping Schematics Required:*

- A. A fully labeled, detailed schematic of the potable and non-potable water piping immediately surrounding the backflow prevention device installation showing the following:
- Height above the finished floor.
 - Distance from walls.
 - Type of equipment or system(s) downstream of (after) the backflow device. (Chemical treatment, operating pressure, etc.)
 - Manufacture, make, model, size and alignment of the backflow prevention devices
 - Location of upstream and downstream shut-off valves.
 - Any additional information particular to the backflow prevention device installation that should be reviewed.
 - Also include a proposed date of installation.
 - We will need notification once the device is installed, as the Law requires us to test the backflow device within 14 days of installation.

Please complete sketch on next page or attach a plumbing plan.

The piping schematic must be at least 8 ½" X 11" with a complete title block. (Name of facility, address, date, preparer, scale, etc.). Utilize one data sheet for each backflow prevention device.

Submitted By: _____

Of: _____

Address: _____

Date: _____ Telephone # _____

Plumber's or Sprinkler Fitter signature: _____

Plumber's or Sprinkler Fitter License #: _____

Dracut Water Supply District Assigned Device ID # _____

Installation Approved _____ **Installation Rejected** _____

Comments _____

Reviewer's Signature _____ Date _____



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THIS DESIGN DATA SHEET FOLLOWS 310 CMR 22.22 REQUIREMENTS

DRAW SCHEMATIC HERE

***There needs to be a repair kit for each device on scene at time of
initial testing.***

The department will need this paperwork at least two weeks in advance
of installation to view and approve.
