

Cross Connection Control Program: Backflow Prevention Assembly Removal Form

This form must be completed and signed by an engineer, plumber, or a certified backflow prevention assembly tester verifying the backflow prevention assembly listed below is no longer connected and has been removed. As a licensed professional, the person signing this form acknowledges the backflow prevention assembly and cross connection/hazard has been removed. Any falsification information submitted in this governmental form will be prosecuted.

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prosecuted.	ard has been removed. Any faisifi	cation information submitted in this governmental form wi
Location Info	ormation	
	Location Name	
	Address of Service	
	Manager/Owner Full Name	
	Phone Number	
	Email Address	
Assembly In	formation	
	Serial Number	
	Assembly Type	
	Size	
	Manufacturer	
	Assembly Physical Location	
Tester Inforn	nation	
	Company Name	
	Company Phone Number	
	Licensed Professional Name	

Reason for Removal

- 1			
- 1			
- 1			
- 1			

I acknowledge the backflow prevention assembly listed above has been removed from this location and the cross-connection/hazard no longer exists where a backflow prevention assembly is needed.

Name	Title	
Signature	Date	