

OTTER LAKE WATER COMMISSION 2010 CROSS-CONNECTION SURVEY

Name: _____

Service Address: _____

Phone #: _____

Date Completed: _____

Please check **YES** or **NO** on the following items:

	<u>YES</u>	<u>NO</u>
In-ground lawn irrigation system	<input type="checkbox"/>	<input type="checkbox"/>
In-ground swimming pool	<input type="checkbox"/>	<input type="checkbox"/>
Private fire protection & lines	<input type="checkbox"/>	<input type="checkbox"/>
Boiler heat system	<input type="checkbox"/>	<input type="checkbox"/>
Water cooled HAVC system	<input type="checkbox"/>	<input type="checkbox"/>
Food and/or chemical processing equipment	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory facility (lab facility not restroom)	<input type="checkbox"/>	<input type="checkbox"/>
Private well system plumbed to existing Commission water	<input type="checkbox"/>	<input type="checkbox"/>
Private well system separately plumbed from Commission water	<input type="checkbox"/>	<input type="checkbox"/>

This form needs completed per Illinois EPA regulations prior to May 15, 2010 to prevent any further action from the Commission.