

**City Of Napoleon**  
**FIELD SURVEY FORM**

Premises Address: 1075 Industrial Dr. Company Name: Advance Drainage Systems  
Contact Name: Elden Postelano Contact Phone No: 599-9865  
Service No: 7806 Service Size: 2" Meter No: below Meter Size: below Date Installed: 4-14-78  
Type of Inspection: Initial  Follow-Up  Date of Inspection: 4-28-98 Inspector Name: Charles  
Type of Use: Industrial  Commercial  Residential  Water Main Size: 16" System Pressure 65-75psi  
Type of Service: Domestic  Fire  Combined  Any Other Water Source: Yes  No   
If Yes, Other Type: Additional City Service  Auxiliary Source  Interconnected: Yes  No   
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**DOMESTIC SYSTEMS**

Type of Use: Processing  Product  Potable  Sanitary  Irrigation  Limited Area Fire   
Type of Heating: Forced Air  Electric  Solar  Boilers  Chemical Treatment: Yes  No   
Type of Cooling: Cooling Tower  Chiller  Chemical Treatment: Yes  No  Direct Conn: Yes  No   
Dishwasher: Yes  No  Eductors: Yes  No  Garbage Disposal: Yes  No  Jacuzzi: Yes  No   
Swimming Pool: Yes  No  Air Gap at Supply: Yes  No  Pumps Used: Yes  No  Capacity \_\_\_\_\_  
*gas radiant heat also*

**INSPECTOR COMMENTS/DIAGRAMS**

*This facility has 2-1" water meters can being used for potable water, the other being used for cooling tower + swimming equipment.*

*The meter for potable water has a Watts 1" DCD 207111-QT Serial# 47974*

*The meter for cooling tower has a Watts 1" RP2 209 Serial# 61572*

*was noticed that full pipe for cooling tower tank below floor*

*Serial # 1" potable meter 47066409 Cooling tower Serial# 47066408*

**FIRE PROTECTION SYSTEMS**

System Type: Dry Spinkler  Wet Sprinkler  Dry Riser  Wet Riser  Hydrants: Yes  No   
Hydrants Self-Draining: Yes  No  Storage Provided: Yes  No  Antifreeze Legs: Yes  No   
Auxiliary Water Storage: Yes  No  Pumps Used: Yes  No  Capacity: \_\_\_\_\_ (GPM) Pressure: \_\_\_\_\_

**INSPECTOR COMMENTS/DIAGRAMS**

*Fireline is 6" on a 16" main installed 4-13-78*

*D.C.D.A. devices needs installed on fireline*

*note: all devices to be installed shall be in horizontal position*

**BACKFLOW PREVENTION REQUIREMENTS**

*Backflow devices in place here are fine, They need to be tested  
Devices installed 8-4-95 Test Completed 6-4-98*