Mailing address Polen 408 Definice, Ohio 43512

City Of Napoleon FIELD SURVEY FORM

Premises Address: 464 Company Name: Company Name: Contact Name: Contact Phone No: Service No: Service Size: Meter No: Meter Size: Date Installed: Type of Inspection: Initial Follow-Up Date of Inspection: Inspector Name: Type of Use: Industrial Commercial Residential Water Main Size: System Pressure
Type of Service: Domestic _x _ Fire _ Combined Any Other Water Source: Yes _ No _x _ If Yes, Other Type: Additional City Service Auxiliary Source Interconnected: Yes _ No ******************************
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
INSPECTOR COMMENTS/DIAGRAMS
Fill lines all below flood own
builte for Heating water for washing no chemicals
Under For Heating Plane, Scaled want weeks wat freeze mix no prater line Hocked on
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 Artifician Leavy West 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:
GI WI) I Tessure.
INSPECTOR COMMENTS/DIAGRAMS
R.P.A. Reduced Pressure Assembly
BACKFLOW PREVENTION REQUIREMENTS
a l'Reduced Pressure Assembly most be natelled after your cotter meter