



BACKFLOW PREVENTION BY-LAW 2012-27

ENVIRONMENTAL SERVICES DEPARTMENT

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BACKFLOW PREVENTER REMOVAL FORM

Date (YYYY/MM/DD): _____

****For Office Use Only****

Facility ID: _____ Facility Address: _____

Owner: _____ Phone: _____ Email: _____

Occupant: _____ Phone: _____ Email: _____

Qualified Person: _____ OWWA #: _____ Phone: _____

Company Name: _____ Phone: _____ Email: _____

Device Information

Device Location: _____ Purpose of Device: _____

Device Type: RP ☐ DCVA ☐ PVB ☐ SRPVB ☐ Others: _____

Make: _____ Model: _____ Serial #: _____ Size: _____

Reason no longer required (provide details if hazard is removed, line capped, etc.):

FULL DISCLOSURE REQUIRED: This form is intended to assist the Qualified Person in carrying out an amendment to the current cross connection control survey. It is the responsibility of the owner or building occupier, to bring to the attention of the Qualified Person all water uses within the premises to permit inspection for potential cross connections and recommendation of corrective actions. Cross Connections not identified in the survey may be deemed as works carried out subsequent to the survey in violation of the City of Markham Backflow Prevention By-law 2012-27.

Qualified Person Name:

Signature:

Owner/Tenant Name:

Signature:

The personal information collected herein is subject to the Municipal Freedom of Information and Protection of Privacy Act. The information is collected under the authority of the City of Markham By-law 2012-27 and may be used for the enforcement and administration of the By-law, and will be stored by the City for such period of time which facilitates the enforcement and administration of the By-law. Completion of this form constitutes consent by the owner/tenant to these terms and uses, unless otherwise modified or revised in writing and delivered to the Director of Environmental Services for the City of Markham.