



TOWN OF WESTON
COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC WORKS

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Water Superintendent

BACKFLOW DEVICE DESIGN DATA AND PLUMBING PLAN

MUST BE SUBMITTED PRIOR TO INSTALLATION

SUBMIT COMPLETED FORM TO: Water Superintendent, Weston Water Division

TOWN OF WESTON – DEPARTMENT OF PUBLIC WORKS
190 BOSTON POST ROAD BY-PASS
WESTON, MA 02493

PROPERTY OWNER INFORMATION:

Owner

Street Address

City

State

Zip Code

FACILITY INFORMATION

Facility Name

Street Address

City

State

Zip Code

Contact Person

E-mail

Phone Number

Is this Facility: New or Existing (check one)

Describe the type of business or activities carried out at this facility:

DEVICE DATA

Exact Device Location

Make Model Size Hot or Cold Water Unit

Type of Gate Valve

RPBP DCVA PVB By-pass Arrangement Yes No

From what type of contamination is the water supply protected?

DEVICE MAINTENANCE AND TESTING SCHEDULE

Describe the maintenance and testing schedule of the above device(s). (Please refer to 310 CMR 22.22)

CROSS CONNECTION PLAN SUBMITTAL REQUIREMENTS

1. Completed Device Design Data Sheet
2. Schematic or blueprint of plumbing system (at least 8 1/2" x 11") detailing:
 - a. Location of upstream & downstream shut off valves
 - b. Make, model, size and alignment of device
 - c. Location of potable / non-potable water lines
 - d. System, source, or equipment fed downstream of device, complete with information on the secondary system (operating pressure, chemical treatment, etc.)
 - e. Add devices must be installed in accordance with 310 CMR 22.22

This Design Data Sheet is only for approval of a backflow device installation. All other permits must be acquired by the respective town offices.

Submitted By

Address

Date

E-mail

Phone / Fax Numbers