## 



## DEPARTMENT OF ENVIRONMENTAL PROTECTION

Division of Water Supply & Geoscience - Bureau of Water System Engineering Mail Code 401-03, 401 East State Street - P.O. Box 420, Trenton, New Jersey 08625-0420

## Application Form for Initial Physical Connection Permit

1/ Applicant Details	
Applicant/Owner/Company Name Permanent Legal Address	
City/Town	State Zin Code
Telephone ( ) Fax Number ( )	e-mail
City/Town Fax Number () Contact Person Name	Title
2/ Details of Facility Name of Facility Address of Facility (Street/Road)	
Municipality Block	County
Zip Code Block	Lot
Do you have an existing Physical Connection Permit?  If yes, enter Permit NumberWPC preventer(s) listed on Page 2 of this application to this page the backflow preventer(s) already installed?  Number of new backflow preventer(s) under this application.	permit? Yes No, I want a separate permit Yes No
3/ Details of unapproved supply Source of Unapproved Water: Unapproved Water Used for: Cross Connection Exists or Public Water & Unal If from Well(s): number of wells Well Perm	pproved Water Exist Within Same Building
4/ Details of public supply Public Water Used for: Domestic, Fire Protection Name of Public Community Water System Public Water System ID number (PWSID)	
The Public Community Water Supplier hereby concurs this application Reviewed by:	
Authorized representative:	Title
Signature Da	
5/ Name of Local Administrative Authority  Board of Health, Plumbing Sub-Code Official,	Exempt (Reason)
Name	Phone ()
6/ Applicant's Signature	
Signature  INSTRUCTIONS - Complete both Page 1 of 2 and obtain the	
and mail to the Department at the above address &	Owner of the Public Water System with:

- and mail to the Department at the above address & Owner of the Public Water System with:

  A Drawing showing; the facility layout, surrounding streets, location of unapproved water supply and Public Water Service Connections,
- location of meters and backflow preventer valve(s) & a schematic of sufficient detail to show the installation of each backflow preventer valve.
- A Check made payable to; Treasurer State of New Jersey in the amount of \$150.00 shall accompany the application to the Department.
- > This Form shall be used to modify an existing Physical Connection Permit.

Physical Connection Permit Number	-WPC	
-----------------------------------	------	--

## <u>List the Type, Size, Location of Public Water System Service Connections & Backflow Preventer Valve(s)</u> that you are applying for:

	Service	Backflow Prever	ter Location :	Protec	ted By-Pass / Detect	or Check
1.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
2.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
3.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
4.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
5.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
6.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
7.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
8.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
9.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
10.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
11.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size
12.	Domestic Size	D.C.V.A. Size	At:			
	Fire inch	R.P.Z. inch	Protected By-Pass	Size	Detector Check	_ Size