INSTRUCTIONS FOR APPLICATION FOR APPROVAL OF BACKFLOW PREVENTION DEVICES

ERIE COUNTY WATER AUTHORITY
3030 UNION ROAD
CHEEKTOWAGA, NY 14227-1097
(716) 684-1510 (Phone)
(716) 684-3937 (Fax)

A. APPLICATION

Applications for approval of backflow prevention devices must be submitted to the Erie County Water Authority at the above address. Applications must be submitted for all new water services and must also address all existing water services. Four (4) copies of the following must be submitted for approval.

1. Letter of transmittal listing all information submitted for back-flow application and copy of completed checklist.

2. Form DOH-347, Application for Approval of Backflow Prevention Devices (Refer to the example)

3. Engineer’s Report for Approval of Backflow Prevention Devices (Water Authority standard form or report that includes all the same information. Refer to the checklists.)

4. Site plan must be drawn to scale or with dimensions and show the following information (Refer to the example):

   a. General location map (with north arrow)
   b. Name and address of facility
   c. Property lines
   d. Buildings
   e. Size and location of public water mains
   f. All fire and domestic water services to include items to be installed by ECWA:
      1. Size of Corporation Stop, Tapping Sleeve or Saddle w/Valve
      2. Size of Service Line within R.O.W.
      3. Size of Curb Stop or Line Valve at R.O.W.
   g. Meter pits or tile sets
   h. Fire Sprinkler System
      1. Show a riser detail
         (May be submitted as a separate sheet and must include: Name and address of the facility, design engineer’s/architect’s stamp and signature)
      2. State AWWA M-14 Classification
   i. Yard piping, private hydrants, and pumper connection(s)
j. Location and size of proposed tap to public waterline and back-flow enclosures. Label distance from R.O.W. back-flow enclosures (not more than 150 LF).

k. Lawn Irrigation Systems

l. Proposed location of backflow preventer(s)

m. If site is in 100 year flood plain, indicate elevation on drawing

n. Designer’s stamp and signature
   (Stamp must be by a NYS Licensed Engineer/Architect)

5. Plumbing floor plan must be drawn to scale or with dimensions indicated from walls and nearby objects and show the following information (Refer to the example):

   a. Water services
   b. Name and address of facility
   c. Water meter layout
   d. Proposed backflow preventer(s)
   e. Booster pump system(s)
   f. Floor drain(s)
   g. All nearby objects (electrical panels, boilers, chillers, storage tanks, fire pumps, fire sprinkler risers, etc.)
   h. All required clearance dimensions shown or noted
   i. With device manufacturer’s name, model number and size of device shown or noted, in plain view or cross section
   j. Information regarding RPZ enclosure (i.e. “Hot Box”)
   k. Designer’s stamp and signature

6. Vertical Cross Section(s) must be drawn to scale or with dimensions and show the following information (Refer to the example):

   a. Elevations from the floor, ceiling, outside grade and nearby objects
   b. All required clearance dimensions shown or noted (including air breaks and air gaps)
   c. Size and routing of floor drains
   d. Pipe diameters and material types
   e. Indicate direction of flow
   f. Pipe supports (if needed)
   g. Designer’s stamp and signature

B. APPROVAL

The New York State Department of Health has delegated approval of cross connection control projects to the Erie County Water Authority for all Water Authority customers.