

Programmatic Operations and Management
Technical Report for Micro-Irrigation of
Vineyards in the Healdsburg Area

Appendix C

**Cross Connection Control Program
Materials (Sample)**

City of Healdsburg Recycled Water Program Cross-Connection Control Investigation & Test Report

Recycled Water User: _____

Site Address: _____

Form Completed by: _____

Test Date: _____

Site Cross-Connection Testing History

To be completed prior to testing

First cross-connection test for this site? Yes, then skip to "Today's Scheduled Testing"
 No, then continue

Date of last Cross-Connection Control Investigation: _____ passed failed

Date of last complete testing (Parts I & II) _____ passed failed

If the User's system has failed in the past, attach a copy of the failed "Test Report."

Today's Scheduled Testing

Part I (Cross-Connection Investigation) Part II (Cross-Connection Control Test)

*Note: Initial test consists of Parts I and II. Thereafter, Part I is required annually and
Part II is required at least once every 5 years.*

Names of Inspection Team Members

Recycled Water Program Inspector (if present): _____

A.W.W.A. Certified Cross-Connection Control Specialist: _____

Site Supervisor (or representative): _____

Part I: Cross-Connection Control Investigation

Yes	No	For any "No" response, an explanation must be given below under No. 7.
		1a. Did User provide record drawings of recycled and potable water systems?
		1b. Did the inspection team review the drawings?
		2a. Did the team discuss changes made to recycled and potable system since the last test?
		2b. Have the changes (from 2a) been recorded on the drawings?
		2c. Did the team visually inspect changes to verify absences of cross-connections?
		3a. Did the team visibly account for all backflow prevention devices on site (inside and outside)?
		3b. Have all backflow preventers been tested annually according to California Title 17 regulations?
		4a. Did the team field-check the location of the recycled water meter and potable water meter?
		4b. Do all meters appear to be correctly installed?
		4c. Are the water meters free of visible cross-connection?
		5a. Did the User inform the inspector on who has access to the recycled water system?
		5b. Did the team discuss needed training of recycled water supervisor and workers?
		6a. Are the recycled water quick couplers and other recycled water access points easily identified by recycled water signs or color coding?
		6b. Is a "Warning" sign posted where the public enters the recycled water use area?
		6c. Are all the <u>portable</u> fixtures and hoses (used on the recycled water system) permanently labeled to indicate they are for use only with recycled water?
		6d. Are appropriate "Warning" signs in place at recycled water meters, valve boxes, controllers?
		6e. Are all the "Warning" signs in good condition, legible, and visible?

**City of Healdsburg Recycled Water Program
Cross-Connection Control Investigation & Test Report (Cont.)**

7. An explanation must be given for any "No" response posted above.
List the comments and explanations in the space provided below and identify them by question number.

Results of the Cross-Connection Control Investigation

- PASSED
- FAILED

The following actions must be completed by the User prior to re-testing. When the corrections are made, the User must contact the Certified Cross-Connection Control Specialist to schedule another inspection.

Required Date of Completion: _____

Required Corrective Actions:

Inspection Completed By: _____
*Signature of Certified Cross-Connection
Control Specialist*

Certification Number: _____

Date: _____

Report Received By: _____
Signature of User Representative

Print Name and Title: _____

Date: _____

Copies: _____ Recycled Water User
 _____ City of Healdsburg Recycled Water Program
 _____ Cross-Connection Control Specialist

**City of Healdsburg Recycled Water Program
Cross-Connection Control Investigation & Test Report (Cont.)**

Part II: Cross-Connection Control Test

Testing of the Potable Water System: Check Box when Complete

Step 1. Turn off recycled water system at meter.

Step 2. Open all valves on the recycled water supply, downstream of the meter.

Step 3. Depressurize and drain (if possible) recycled water system.
Record pressure in recycled water system after depressurizing: _____ psi

Step 4. Confirm potable system is activated and pressurized by operating a few potable fixtures.
Record pressure in potable water system: _____ psi

Step 5. Potable water system must remain pressurized after recycled water system has been depressurized and while Steps 6 through 11 are performed.

Step 6. Identify the location, and obtain access to, all the potable water fixtures to be tested in Steps 7 and 8.

Step 7. Open all (one at a time) outdoor potable water fixtures and note any fixtures that have no flow.

Step 8. Open all indoor faucets and drinking fountains, and note any that have no flow.
List all potable fixtures with no flow observed in Steps 7 and 8:

Step 9. Open (one at a time) all fixtures on the recycled water system.
Note if water flows through any of the fixtures and the location of the affected fixtures:

Quick connects _____ Sprinkler heads _____

Other type of fixtures _____

Step 10. If no flow was found in Steps 8 and 9, proceed to the "Results" section. Observed flow may indicate a cross-connection. However, flow discovered in Steps 8 and 9 may be caused by incomplete drainage of the recycled water system. The test shall be extended at this point to confirm the source of the flow.

Step 11. If a valid cross-connection is discovered, continue with testing of the recycled water system to determine the locations of the cross-connections. After the testing is completed, turn off the supply of recycled water, depressurize the system, and disinfect the potable water system (per ANSI/AWWA guidelines). Note locations of cross-connections below:

**City of Healdsburg Recycled Water Program
Cross-Connection Control Investigation & Test Report (Cont.)**

Results of the Cross-Connection Control Test

- PASSED
- FAILED

are made, the user must contact the Certified Cross-Connection Control Specialist to schedule another inspection.

Required Date of Completion: _____

Required Corrective Actions:

Inspection Completed By: _____
Signature of Certified Cross-Connection Control Specialist

Certification Number: _____

Date: _____

Report Received By: _____
Signature of User Representative

Print Name and Title: _____

Date: _____

- Copies: _____ Recycled Water User
 _____ City of Healdsburg Recycled Water Program
 _____ Cross-Connection Control Specialist

