

# BRUNSWICK COUNTY PUBLIC UTILITIES

## SPECIAL WATER USE PERMIT AGREEMENT

Once complete, please email this form to Cross-Connection Control Coordinator Shalene Reece at [shalene.reece@brunswickcountync.gov](mailto:shalene.reece@brunswickcountync.gov). For questions please call (910) 253-2457.

Company Name: \_\_\_\_\_ Tax ID # \_\_\_\_\_

Billing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Mobile: \_\_\_\_\_

I, \_\_\_\_\_ on behalf of the above-mentioned company agree that our company will comply with the Brunswick County Public Utilities (BCPU) requirements for special water use with water from the BCPU distribution system. These requirements can be viewed online under the "Special Water Use" section at <https://www.brunswickcountync.gov/554/Cross-Connection-Backflow-Prevention>. These requirements shall be met when filling tanks, tankers, trucks, or using water from the hydrants and other appurtenances connected to the BCPU distribution system.

Signature of the Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### TYPE OF BACKFLOW PREVENTION:

Air Gap Tank Size: \_\_\_\_\_ (gallons)

Backflow Preventor and Meter Assembly

Meter

Backflow Preventer

Make: \_\_\_\_\_

Make: \_\_\_\_\_

Size: \_\_\_\_\_

Size: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Serial Number: \_\_\_\_\_

Beginning Meter Reading: \_\_\_\_\_

BCPU Placard Serial Number(s): \_\_\_\_\_

Meter and Backflow Prevention approved by: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>For Billing Use Only</b></p> <p>BCPU Hydrant Account # _____</p>
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