



Town of Harwich  
Water Department

196 Chatham Road, Harwich, MA 02645 USA  
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P. 508-432-0304 water@harwich-ma.gov

**IRRIGATION BACKFLOW DEVICE INSTALLATION**

Request Date: \_\_\_\_\_ Install Date: \_\_\_\_\_  
Owner Name: \_\_\_\_\_ Street Address: \_\_\_\_\_  
Installer: \_\_\_\_\_ Installer Phone: \_\_\_\_\_  
Installer License #: \_\_\_\_\_ Installer Email: \_\_\_\_\_

In accordance with Massachusetts Department of Environmental Protection Drinking Water Regulation 310 CMR 22.22, and Massachusetts State Plumbing Code 248 CMR 2.14, I **hereby certified that a testable backflow device will be installed at the time of the irrigation system installation in order to prevent cross connection contamination with the water supply.**

Maker	Model#	Serial#	Size
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Model# Is this device (circle one):    NEW                  REPLACEMENT

**Device Type:** Reduced Pressure (RP)     Pressure Vacuum Breaker (PVB)

\_\_\_\_\_  
Installer Signature

**DEPARTMENT APPROVAL**

\_\_\_\_\_  
Superintendent or Designee

\_\_\_\_\_  
Water Account #