

Residential Customer Survey

Date: _____

Name: _____

Mailing Address: _____

Physical Address: _____

Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Please check all that apply

_____ Auxiliary water source water such as a well, used for irrigation
(Cannot be connected to JCWSA water source)

_____ Lawn irrigation system using chemicals, fertilizer, or has booster pump-**RPZ**

_____ Geothermal heating or cooling system connected to a potable water source-**Testable DC**

_____ Water system booster pumps-**RPZ or Testable DC**

_____ Yard hydrants-**Vacuum Breaker**

_____ If none apply to you please check here