



SAFFORD WATER BACKFLOW PREVENTION INSTALLATION PERMIT

405 West Discovery Park Blvd., Safford, AZ 85546 • (928) 432-4200 • Fax (928) 348-3150

City of Safford Use:
Permit No.

Customer's Name

Service Address

Water Meter #

Account #

TYPE OF SERVICE

BPA INSTALLATION TYPE

WA

Replacement

IR

New Installation

FP

BPA required per building plan

CW

BPA SN: _____

Stolen Assembly Replacement

LICENSED CONTRACTOR DELCARATION *Signee is a representative of or has a contractors license for one of the classes listed below*

I hereby affirm that I am a LICENSED CONTRACTOR eligible to install the backflow assembly herein on the aforementioned property and regulated under the provisions of A.R.S. TITLE 32. CHAPTER 10 (SEC. 32.1 101 SEC. 1198.05 or as amended)

Print Contractor Name: _____ License # ROC _____

Mailing Address _____

					City		State	Zip
COMMERCIAL/RESIDENTIAL	<input type="checkbox"/> A	<input type="checkbox"/> B-1	<input type="checkbox"/> B-2	<input type="checkbox"/> L-37	<input type="checkbox"/> L-77	<input type="checkbox"/> KB-1	<input type="checkbox"/> K-37	<input type="checkbox"/> K-77
RESIDENTIAL ONLY	<input type="checkbox"/> B	<input type="checkbox"/> C-37						
FIRE PROTECTION ONLY	<input type="checkbox"/> L-16	<input type="checkbox"/> C-16	<input type="checkbox"/> K-16					
IRRIGATION ONLY	<input type="checkbox"/> A-21	<input type="checkbox"/> L-44	<input type="checkbox"/> K-44	<input type="checkbox"/> C-21				
SPECIALTY	<input type="checkbox"/> L-5	<input type="checkbox"/> K-5						

OWNER OCCUPANT DECLARATION *Signee must live on property and there may not be any business guests or employees*

I hereby, declare under penalty of perjury, in compliance with the administrative code (Sec. 303.(A) 1.) that the work for which this permit is sought will be done at the aforementioned property by me the permittee. As Owner Occupant . (State of Arizona, County of Graham)

Print Owner-Occupant Name: _____

GOVERNMENT DECLARATION *Must be a representative of a City, County, State, Federal or Tribal Governmental Agency*

I hereby, affirm that I am an authorized GOVERNMENT REPRESENTATIVE requesting this permit. The work is to be accomplished on property of the governmental unit for which my department or agency is responsible. (A.R.S. Title 32, Chapter 10, (SEC. 1121)).

Print Government Representative Name: _____ Government Agency Name: _____

CERTIFICATE BY PERMITTEE

I hereby certify that I have read and examined this permit and know the information supplied by me to be true and correct and that all provisions of laws and ordinances governing the type of work will be complied with whether specified herein or not. I understand that the granting of this permit requires that I follow all plumbing codes, state, and local regulations regarding the installation of this assembly. I understand representatives of the city may enter the aforementioned property for inspection purposes.

Signature: _____ Print: _____

Phone #: _____ e-mail: _____ Permit Date: _____

Permission is hereby granted to install a backflow assembly at this location herein described in accordance with all applicable ordinances and regulations based on the permittees declaration on this form.

Safford Water Representative: _____