



NOTE: All information on this form must be filled out completely or the request will not be processed. The water meter associated with this backflow must be permitted before a backflow inspection can be scheduled.

PERMITS OFFICE - CROSS CONNECTION – BACKFLOW INSPECTIONS

DATE: _____ PERSON REQUESTING: _____

PERSON REQUESTING PHONE #: _____

BUILDING PERMIT #: _____

MWS ACCOUNT #(S): _____

ADDRESS: _____

*CONTR/PLUMBER NAME: _____

* CONTR/PLUMBER PHONE #: _____

* CONTR/PLUMBER EMAIL: _____

**BACKFLOW TYPE(S): DOMESTIC IRRIGATION FIRE POOL

**BACKFLOW IN PIT: YES NO

**NEW INSPECTION: RE-INSPECTION: CONTR/PLUMBER INITIAL: _____

*Your Contractor or Plumber

**To Be Completed By Your Contractor or Plumber

EMAIL FORM TO:
MWS.DS@NASHVILLE.GOV

RIGHT CLICK TO ADD TEXT

REV.10.01.24 SMR

<u>OFFICE USE ONLY</u>
WORK ORDER #: _____
INSPECTION DATE: _____
INSPECTION TIME: _____