



Cross Connection Program

Application for Extension of Time for Installation of Containment Assembly

Property Owner Information as listed in Wake County Real Estate Records:

Address: _____

City: _____ NC Zip Code: _____

Office Use Only

☐ Initial Due Date: ____/____/20__

☐ Extension Due Date ____/____/20__

☐ Extension Denied

Supporting Documentation:

☐ Metered services listed

☐ Three bids submitted

☐ Proof of Hazards Protected

1. Services for which an extension of time for installation of containment assemblies is requested:

☐ Domestic/Irrigation Services

☐ Fire Service Line

2. Date installation will be completed: _____

(Completion date not to exceed 275 days from initial due date)

3. Three bids detailing scope and cost of work are required for an extension of time to be granted.

4. Proof that all severe hazards identified during site survey have been protected by installation of an isolation assembly

Owner

I hereby state that the Property Owner listed above is the owner of the property located at the address above and that the Owner agrees to indemnify to the fullest extent permitted by law, the City of Raleigh, the City of Raleigh Public Utilities and Cross Connection Control Program (hereinafter collectively called "the City") and their respective officers, representatives, agencies, contractors, servants and employees from and against any and all claims, suits actions, proceedings and losses ("claims and losses") that may arise from this request, including the failure to install a containment assembly. I understand that falsification of any statement is considered a willful violation which could result in civil penalties and fines. During this time of extension, if the building's use changes, I will insure submittal of a new application that reflects the new use.

Name of Property Owner

(____)____-_____
Phone

Address

City

State

Zip Code

Printed Name and Signature of Owner or Legally Authorized Representative*

Date

*Authorized corporate officer (if corporation), member (if LLC) or general partner (if partnership) for the Property

Meter #*	Service Address*	Office Use Survey Conducted on service?	Office Use Isolation backflow needed for extension?	Office Use Isolation backflow assembly installed and current passing test report submitted to CC Program

Submit completed forms and required documentation to: cross.connection@raleighnc.gov
For more information about Cross Connection Program go to: raleighnc.gov (Search: Cross Connection)
919-996-3245 (choose option 4 then 2)

Additional Metered Services

[illegible]