



PO Box 1084 Tyler, TX 75710
Public Water System ID No: 2120015
Customer Service Inspection Certificate

Service Address: _____

Reason for Inspection: [] New Construction [] Other: _____
[] Major Renovation [] Existing service where contaminant hazards are suspected

I, _____, upon inspection of the private water distribution facilities connected to the
aforementioned public water supply do hereby certify that to the best of my knowledge:

- Compliance Non-Compliance
[] [] 1. No direct connection between the public drinking water supply and potential source of
contamination exists. Potential sources of contamination are isolated from the public water system by an air gap
or an appropriate backflow prevention assembly in accordance with Commission regulations.
[] [] 2. No cross-connection between the public drinking water supply and a private water system
exists. Where an actual air gap is not maintained between the public water supply and a private water supply, an
approved reduced pressure zone backflow prevention assembly is properly installed and a service agreement
exists for annual inspection and testing by a certified backflow prevention assembly tester.
[] [] 3. No connection exists which would allow the return of water used for condensing, cooling or
industrial processes back to the public water supply.
[] [] 4. No pipe or pipe fitting which contains more than 8.0% lead exists in private distribution
facilities installed on or after July 1, 1988.
[] [] 5. No solder or flux which contains more than 0.2% lead exists in private water distribution
facilities installed on or after July 1, 1988.

I further certify that the following materials were used in the installation of the private water distribution facilities:

Service Lines Lead [] Copper [] PVC [] Other [] _____
Solder Lead [] Lead Free [] Solvent Weld [] Other [] _____

I recognize that this document shall become a permanent record of Crystal Systems Texas, Inc. and that I am legally
responsible for the validity of the information I have provided.

Remarks: _____

Signature of Inspector Title Type of Registration Registration Number

Date Inspected: _____