

## **Permanent Underground Irrigation Systems**

All underground irrigation systems connected to the Town of Northborough water system shall meet the following criteria:

- Backflow prevention shall be provided in accordance with Section 16 of the current Regulations for Users of the Northborough Water Supply and the MADEP drinking water regulations. Design data sheet for the backflow prevention device must be submitted for review and approval by the Department at the time of meter purchase. Said backflow prevention device shall be tested by the Department prior to putting into service and annually thereafter. Non-testable devices are not allowed.
- Plumbing permit must be issued for the connection work including a cross connection control survey performed by the Department.
- Locations with municipal water service and an on-site sewer disposal shall have irrigation system connection installed immediately after the municipal water meter.
- Locations with municipal water and sewer services shall have a separate water meter with two isolation valves installed immediately in advance of the existing meter.
- All meters and appurtenances shall be purchased from the Town of Northborough (Department). The Town (Department) shall install the meter and upstream valve (before) the meter and the plumber shall install the downstream valve (after) the meter.
- No connections other than irrigation shall be made to the irrigation line including all taps and hose bibs.

Non-compliance with this regulation will be deemed unauthorized use of water and the noncompliant property owner will be subject to the penalties outlined in the current Regulations for Users of the Northborough Water Supply - Appendix B.

### **If you are going to install a separate meter you must follow the procedures listed below:**

1. Obtain a licensed plumber. Plumber must obtain a plumbing permit from the Building Department (<https://northboroughma.viewpointcloud.com/categories/1085>)
2. Purchase a second meter from the Town of Northborough – DPW, 63 Main Street Northborough, MA 01532

#### Meter Fee's

¾" Meter with Isolation Valve \$710.00

1" Meter with Isolation Valve \$770.00

1 ½" Meter with Isolation Valve \$1,010.00

2" Meter with Isolation Valve \$1,290.00

Please submit these completed forms to the Town of Northborough:

DPW  
63 Main Street  
Northborough, MA 01532  
Email: [dpw@town.northborough.ma.us](mailto:dpw@town.northborough.ma.us)

**Request for second meter**  
**Permanent Underground Irrigation System**

**Service Address:** \_\_\_\_\_

**Owner Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of Owner (Owner's Representative): \_\_\_\_\_

Date: \_\_\_\_\_ Printed Name: \_\_\_\_\_

Application Fee: \$50.00	<b>FOR OFFICE USE ONLY</b>		
Amount Paid: _____	Check Number: _____	Date Received: _____	
Outstanding Account Balances (Water, Sewer and/or Taxes):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Water and/or Sewer Betterments Due?:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Contractor is an Authorized Installer?:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is a Backflow Prevention Device Required?:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Application Reviewed: _____	Water/Sewer Division: _____	Signature _____	Date: _____
Comment: _____			
Application Approved: <b>Water:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<b>Sewer:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Authorized Signature: _____	Public Works Director		Date: _____



TOWN OF NORTHBOROUGH
PUBLIC WORKS DEPARTMENT

63 Main Street, Northborough, MA 01532 T: (508) 393-5030 F: (508) 393-6996

CROSS CONNECTION CONTROL DEVICE

DESIGN DATA SHEET

A

Property Owner/Legally Responsible Official: (Please print)

Full Name: \_\_\_\_\_ Tel.: (\_\_\_\_) \_\_\_\_\_ Including Area Code and Extension
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

B

Facility Information: (Please print)

Facility Name, Site or Individual \_\_\_\_\_ This Facility is: [ ] New [ ] Existing
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Full Name of Contact Person / Agent \_\_\_\_\_ Tel. (\_\_\_\_) \_\_\_\_\_ Including Area Code and Extension

General description of business or activities at this facility: \_\_\_\_\_

C

Device Data: (Please print)

Manufacturer: \_\_\_\_\_ Model No.: \_\_\_\_\_

Device Type: [ ] Reduced Pressure Backflow Preventer (RPBP) [ ] Double Check Valve Assembly (DCVA)

Size of Device: \_\_\_\_\_ [ ] Hot Water Unit [ ] Cold Water Unit Bypass Arrangement: [ ] Yes [ ] No

Location of Device: \_\_\_\_\_

Contamination Threat (From what type of contamination is the water supply protected?): \_\_\_\_\_

Number of Other Devices Located at This Facility: RPBP's: \_\_\_\_\_ DCVA's: \_\_\_\_\_ Other: \_\_\_\_\_

Type of Gate Valves (Gate valves for fire systems must be UL or FM approved): \_\_\_\_\_

D

Device Maintenance and Testing Schedule: (Please print)

Describe the Maintenance and testing schedule of the device(s) described above. Please refer to 310 CMR22.22.

Reduced Pressure Zones (RPBP) - twice (2x) per year by the Northborough Public Works Department.

Double Check Valve Assemblies (DCVA) - once (1x) per year by the Northborough Public Works Department.



**Cross Connection Plan Submittal Requirements:** (Please print)

Plumbing Plan:

1. Completed title block (name of facility, address, date, preparer, scale, etc.)
2. Schematic or print of plumbing system (at least 8½" x 11") using acceptable symbols and nomenclature, detailing:
  - a. Clearances in device installation
  - b. Location of upstream and downstream shutoff valves
  - c. Make, model, size and alignment of device
  - d. Location of potable water lines
  - e. System, source, or equipment fed downstream of device, complete with information on the secondary system (operating pressure, chemical treatment, etc.)

When installation of device(s) involve large or complex plumbing systems, formal prints must be submitted with a Massachusetts Registered Professional Engineer's stamp, subject to the descriptions of the reviewing authority. Describe the Maintenance and testing schedule of the device(s) described above.

Submitted by: \_\_\_\_\_

Company: \_\_\_\_\_ Tel.: (\_\_\_\_) \_\_\_\_\_  
Including Area Code and Extension

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner / Agent Date: \_\_\_\_\_



**Approval: Northborough Public Works Department**

Device is:  Approved  Not Approved Comment: \_\_\_\_\_

\_\_\_\_\_  
Full Name (please print) License No.: \_\_\_\_\_

\_\_\_\_\_  
Signature Date: \_\_\_\_\_