



Sunnyvale

ACCOUNT NUMBER

PERMIT NUMBER

RETAIL CUSTOMER NAME*

METER NO.1

METER NO. 2

RETAIL CUSTOMER ADDRESS*

LOCATION ID

**INDUSTRIAL, COOLING TOWER, AND DUAL-PLUMBED SERVICE
RECYCLED WATER SELF-MONITORING REPORT**

REPORT TYPE*:

ANNUAL

PROGRAM

Customers are required to submit an annual Self-Monitoring Report by **July 1**. Complete the required (*) fields, certify the information with your signature, and click the "Submit" button to submit your report. Contact the Recycled Water Coordinator at (408) 730-7561 with any questions.

Yes No	COMPLETE 1-7 AND NOTE HOW ANY ISSUES ARE RESOLVED*
	1. Are advisory signs and tags in good condition and posted consistent with City of Sunnyvale approved plans to inform the public that water is recycled? If not, describe actions taken to correct (if you do not have approved plans for the site, please state here):
	2. Is there evidence of recycled water runoff from the site? If yes, please estimate the volume, and submit map of affected area. Also, describe actions taken to correct (and date completed):
	3. Is there an odor of wastewater origin within the site? If yes, describe apparent source, characterization, direction of travel, and any public use areas or off-site facilities affected by the odor. Also, describe actions to correct (and date completed):
	4. Are tamper evident valve seals intact and exposed piping for the recycled water system labeled as per City approved plans? If not, describe actions taken to correct (and date completed):
	5. Is there evidence of leaks or breaks in the recycled water system pipelines or tubing? If yes, describe actions taken to correct (and date completed):
	6. In the last year, has the plumbing configuration changed from what has been approved, including (if service includes use of recycled water in cooling tower) changes to the tower such as modifications to the approved air gap or drift eliminator? If yes, describe the modifications and note if they were reviewed by the City:
	7. For services that include cooling tower recycled water use, recycled water must be treated with chlorine or other biocide to minimize growth of Legionella or other microorganisms. Indicate the type of biocide used:
	8. Dual-plumbed facilities must be inspected by an AWWA certified Cross-Connection Specialist annually, and a cross-connection test completed every four years. Please provide the following information for the inspection and attach the cross-connection test if due (our records show your last test was completed _____): Inspector Name _____ Date of Inspection _____ Certification Number _____

SITE SUPERVISOR OF RECORD (PRINT)*

DATE OF INSPECTION*

MAILING ADDRESS*

CITY*

STATE*

ZIP*

OFFICE PHONE

EXTENSION

CELL PHONE

FAX

EMAIL*

Report Certification Statement:

By signing and submitting this Self-Monitoring Report, I certify that the information in this report is correct and true to the best of my knowledge.

SIGNATURE*

(Once signed, you will no longer be able to edit this report)