



## Request For Backflow Permit

CITY OF  
TUCSON  
TUCSON WATER  
DEPARTMENT

Company: \_\_\_\_\_

APA #: \_\_\_\_\_ Request By: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Location information-please supply as much info as possible

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

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

Location ID: \_\_\_\_\_

Service ID: \_\_\_\_\_

Meter Number: \_\_\_\_\_

Existing BPA serial #: \_\_\_\_\_

**FAX request to (520) 791-2614**

**Permit #** \_\_\_\_\_

Issued by: \_\_\_\_\_ Date: \_\_\_\_\_

