



Permit #

Date

## Cross Connection Affidavit

To be submitted by the permit holder at the completion of the certification.

Property Address

Permit Holder

Device Type:  Device Size:

Location:  Serial Number:

Date Work Completed

**Comments or  
Additional  
Information**

Passed  Failed

I affirm by initialling and submitting this affidavit that all cross connection devices have been properly inspected, identified and located on the property corresponding to the address above.

Initial Here

Print Name

License/Certification Number:  Expiration Date: