REQUEST TO INSTALL AND COMPLETED WORKS
FOR A BACKFLOW PREVENTION DEVICE

REQUEST TO INSTALL A BACKFLOW PREVENTION DEVICE

Description: Prior to the installation of a backflow prevention device, approval must be secured from the Westchester County Department of Health.

Applicable Codes: Part 5, Subpart 5-1 Section 5-1.31 of the New York State Sanitary Code and Chapter 873, Article VII, Section 873.707.1 of the Laws of Westchester County, NY.

Fees: Chapter 873, Article XXI of the Laws of Westchester County, NY.

Applicants should contact their local water purveyor to determine the required type of backflow prevention device for their facility. A completed application packet must be submitted to the water purveyor for their original endorsement and signature. Once signed, the water purveyor will forward submittal to the Westchester County Department of Health (WCDOH) for review and approval.

All proposed installations of Backflow Prevention Devices(s) to be utilized on all domestic water services for human consumption must be Lead-Free in compliance with the amended Safe Drinking Water Act (Section 1417).

The department will only accept those backflow prevention devices/assemblies which appear on the current edition of the List of Approved Backflow Prevention Assemblies generated by the University of Southern California Foundation for Cross-Connection Control and Hydraulic Research (FCCCHR). The FCCCHR list is available for free on-line at https://fccchr.usc.edu/list.html

Submittal: When requesting approval of a project pursuant to the above provision, the following list serves as the minimum filing requirements:

1. A completed Form DOH 347 Application for Approval of a Backflow Prevention Device, plans, Engineer’s Report, and specifications, in quadruplicate, are forwarded to the local water purveyor who in turn forwards the submittal to the Westchester County Department of Health. Plans and Engineer’s Report must bear the original seal and original signature of a design professional (Professional Engineer or Registered Architect, licensed and registered in the State of New York).

2. Application fee of $180.00 per device. Check should be made out the Westchester County Department of Health

3. A separate application is required for each backflow prevention device.


5. Letter of Authorization which authorizes the design professional to file applications on behalf of owner.

6. The design professional’s report must include the service peak water demand and a statement that the proposed device is capable of satisfying this demand.

7. All plans must be prepared pursuant to Title VIII, Article 142, Section 7209.2 of the New York State Education Law and bear the warning statement.

8. Piping for the device(s) must be shown in plan and profile views, clearly labeled, dimensioned and detailed.
(9) Bypass piping without cross-connection protection is prohibited. If a bypass is necessary, a backflow prevention device must be installed on such.

(10) The backflow preventer must be installed a minimum of thirty inches (30") above the floor level or eighteen inches (18") from the floor to the bottom of discharge port (whichever is greater). Devices must be installed so that there is access for servicing and testing. Any devices installed at greater than 5'-0" off the floor must include an OSHA approved safety platform for test procedures, and this must be noted on the drawings. A device cannot be installed closer than twenty-four inches (24") from a ceiling or any vertical obstruction(s).

(11) A minimum of twelve inches (12") of clear space shall be maintained above the shut off valve.

(12) A minimum of thirty inches (30") is required in front of the backflow preventer. A minimum of eight inches (8") is required behind the backflow preventer. Devices in parallel must be thirty inches (30") apart.

(13) Vertical installation of backflow preventers will be accepted if the device is approved by the State for that type of configuration. The flow direction must be denoted on the plans.

(14) Reduced Pressure Zone (RPZ) Devices must be installed with an air gap. The air gap shall be twice (2x) the diameter of the discharge (relief valve) port. The air gap and discharge port size must be clearly noted on the drawings. All waste discharges must drain in general to a sanitary sewer or disposed of in an approved manner, which will be reviewed on a case-by-case basis. When the discharge pipe is to be connected directly to a sanitary sewer line, a P-Trap and Backwater Check Valve must be provided.

(15) RPZ discharge piping and receptacles must meet the sizing criteria as delineated in the supplement to the 1981 CROSS-CONNECTION Control Manual for catastrophic failure. If this is not possible, then a discharge sensor, alarm, and automatic shutoff valve may be considered as a special circumstance by the Department of Health. All special circumstances are reviewed on a case-by-case basis.

(16) Adequate provisions must be made for heat and light and such shall be clearly noted on the plans.

(17) Valves must be situated on both sides of the backflow prevention device. A strainer must be placed on the feed side of all devices other than fire services utilizing Double Check Valves (DCV). These items must be clearly noted on the plans.

(18) Site plan showing building address, building locations, cross streets, northern direction, water service and water main size and location, and device location within the premises is required.

(19) If a building or facility has more than one backflow preventer, they may all be included on one plan, provided they are clearly located and identified. If they are all of the same make, model, and size, one typical detail may suffice, otherwise a separate detail for each shall be provided.
(20) **For Devices Installed in Pits:** A pit must be capable of being drained by gravity to grade (daylight). The discharge piping must be of sufficient size and set at adequate grade to take the entire discharge of the RPZ. The discharge pipe shall be adequately supported and equipped with flap valve and screen to prevent the entrance of cold air, small animals and rodents and must discharge to a non-pedestrian area. The plans must clearly indicate that discharge to the outside is to a non-pedestrian area.

(21) For more information please refer to the link to our website.
[https://health.westchestergov.com/cross-connection-control](https://health.westchestergov.com/cross-connection-control)

Should you have any questions please call 914-864-7278 or 914-864-7279.

Completed submittal (with water purveyor’s endorsement) shall be forwarded to:

Westchester County Department of Health  
25 Moore Avenue  
Mount Kisco, NY 10549  
Attention: Natasha Court PE, Associate Engineer

Revised 06/11/2020