



Application for Waterline Freeze Protection Device

OFFICE USE ONLY

Date Received: _____ Reference Number: _____

Fees Paid: Yes No Receipt #: _____

Notes:

Installation Inspected By: _____ Date Inspected: _____

Aqua-Flo Serial Number #: _____

Statement of Confirmation Received and Signed by and Electrician: Yes No

Electrician Name: _____

Property Owner Information

Name: _____ Email: _____

Phone: _____ Phone / Cell #: _____

Mailing Address: _____

APPLICANT INFORMATION (Same as Property Owner)

Name: _____ Email: _____

Phone: _____ Phone / Cell #: _____

Mailing Address: _____

Property Location

Lot: _____ Block/Parcel: _____ Plan: _____

Civic Address: _____

Application For: New Replacement

Type of Device: Transformer - Voltage: _____ Aqua-Flo, Waterline Freeze Protection Device

Device Installer Information

Business Name: _____ Phone / Cell #: _____

Address of Business: _____

Requirements and Conditions:

- A Statement of Confirmation signed by a certified electrician must be submitted along with the application for an Aqua-Flo Device, confirming that there is discontinuity between the heat trace wire and the copper waterline. Statement of confirmation shall be submitted on the Statement of Confirmation Section of this application.
- Heat trace transformers are to be installed by a certified electrician. Transformer secondary circuit must be adequately protected (30amp fuse recommended).
- Aqua-Flo units are to be installed by a certified plumber and inspected by the Manager of Public Works or his/her designate prior to startup.
- The Aqua-Flo unit must be maintained as per the manufacturer's instructions.
- For warranty purposes, the resident is to fill out and return the manufacturer warranty card.

CONSENT OF PROPERTY OWNER (If the applicant is not the registered property owner)

I, the registered owner of the lands described in this application, consent to the filing of this application by the person(s) or company whose name appears as the applicant above.

Signature: _____

Date: _____

CONSENT OF APPLICANT

By signing this application for a waterline freeze protection device, I, _____ and anyone claiming on behalf of the property owner, releases and forever discharges the Northern Town of La Ronge and its affiliates, successors and assigns, officers, employees, representatives, partners, agents and anyone claiming through them (collectively, the "Released Parties"), in their individual and/or corporate capacities from any and all claims, liabilities, obligations, promises, agreements, disputes, demands, damages, causes of action of any nature and kind, known or unknown, which the property owner has or ever had or may in the future have against the Northern Town of La Ronge or any of the Released Parties arising out of or relating to claims.

Signature: _____

Date: _____

Statement of Confirmation

Date: _____

Property Owner: _____

Property Address: _____

Business Name: _____

Electrician: _____

(name)

I, _____ (electricians name) have tested the heat trace system
on _____ (date) and have confirmed that there is no continuity
between the heat trace wire and the copper waterline.