

RIVERHEAD WATER DISTRICT COMPLIANCE LETTER

Date: _____

Riverhead Water District
1035 Pulaski Street
Riverhead, NY 11901

Gentlemen:

Re:

I request that water service be provided to the above named facility. This request is being made with the understanding and agreement that we will at our expense comply with any and all changes requested by the New York State Department of Health Services.

The Public Health code prohibits any connections before a backflow prevention device. Should any connections be made, I understand that I am in violation and I must take appropriate action to remove said violations.

Should we fail to comply with these requests, it is understood that the service will be terminated within **30** days.

Very truly yours,

Owner (signature)

Name: _____
(please print)

Address: _____
