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

Service Line Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please check the following boxes.

**Method used to identify the service line entering the residence/building**.

Visual inspection

* Witnessed installation of the service line
	+ Lead
	+ Copper
	+ Galvanized Steel
	+ Plastic
	+ Other
* Interior self-identification
	+ Lead
	+ Copper
	+ Galvanized steel
	+ Plastic
	+ Other

Location of self-identification

* Foundation
* Basement wall
* Floor slab
* Other

Self-identification method

* Located a wipe lead joint
* Performed a scratch test
* Performed a magnet test

If galvanized; with the water flow being from the water main to the residence/building, has lead pipe ever been used ahead of the galvanized pipe?

* No
* Yes

In order to support your identification, please provide photographic evidence. The photo must show the location used to perform the self-identification and be labeled with the address for the service line identified.

Submit this form with the required photo to:

Email address: *NBCITY@EMBARQMAIL.COM*

Office address: *P.O. BOX 77*

*NEW BLOOMFIELD, MO 65063*

To the best of my knowledge all information contained on this form is accurate.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

 Customer Signature Date