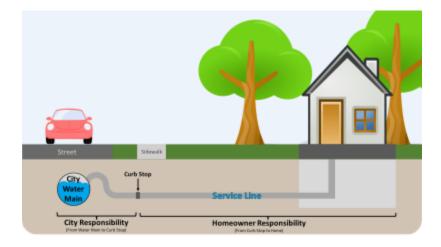
Water Service Survey



You must have JavaScript enabled to use this form.

Address

Please enter the address of the property for which you are completing the survey.

Account Number

Your account number can be found on your paper bill, or you can contact City Hall at (316) 772-5151.

201	ıctuic	Type:

- Single Family Home
- O Multi-Family (Duplex/Quadraplex)
- O Apartment
- O Commercial Building
- O Industrial Facility

Year Built =

Material Types

Use this guide to help identify pipe materials for the following questions.

Service Material

What material is the water service pipe as it enters your home or business?

- O Copper
- O Plastic
- O Galvinized
- O Lead
- O Not sure
- Other

Enter otner
What year was your service line installed?
(This may be the year structure was build) What size pipe is the service line entering your house or business?
Service Material Photo Timber of files allowed: 1-3 Choose
file Upload
Maximum 3 files. 256 MB limit.
Allowed types: gif, jpg, jpeg, png.
Plumbing Material What material or materials is the plumbing in your home or business? Select all that apply. Copper Plastic
☐ Galvanized ☐ Lead
☐ Not sure ☐ Other
Enter other
Plumbing Material Photo One file only. 256 MB limit.
Allowed types: gif, jpg, jpeg, png.
Choose a file Upload
Has your property had a major renovation or plumbing replacement since it was built? ○ Yes ○ No ○ Not sure
If so, when? Has your service line been replaced? O Yes

Not sure so, when? How old are the pipes inside your house? Installed before 1989 Installed after 1989 Sampling Volunteer Information If you are willing to participate in our water quality sampling program, please fill in the fields below provide contact information and answer two brief questions. Thank you! Contact Name Enter the name of the individual who will serve as the contact for the sampling program.
How old are the pipes inside your house? Installed before 1989 Installed after 1989 Sampling Volunteer Information If you are willing to participate in our water quality sampling program, please fill in the fields below provide contact information and answer two brief questions. Thank you! Contact Name
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Contact Name
Enter the name of the individual who will serve as the contact for the sampling program.
Contact Phone Number
Enter the phone number (XXX-XXX-XXXX) at which the contact can be reached.
Call or Text
Would you prefer a call or text?
○ Call
○ Text
© Either
Contact Email
Enter the email at which the contact can be reached.
Do you have a whole-house or point-of-source water filtration system?
O Yes
○ No
O Not sure
.135.54.5
Do you have a water softener?
O Yes
O No
O Not sure

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Submit