



**Development Services Department Building Division**

**PEX FLUSHING CERTIFICATION FORM**

FOR CONTRACTOR USE ONLY. DO NOT USE IF OWNER-BUILDER

SITE ADDRESS: \_\_\_\_\_ APN: \_\_\_\_\_

OWNER: \_\_\_\_\_ PERMIT#: \_\_\_\_\_

This form is a permanent Building Department record. I affirm, under penalty of perjury, that I am a contractor licensed in the State of California doing the work and the PEX plumbing system installed at the address listed above complies with the manufacturer's installation requirements and with the applicable California Plumbing Code standards. Furthermore, I certify that I have complied with the PEX flushing procedure as set forth in Section 604.1.2 of the California Plumbing Code. The new plumbing system was first filled and flushed on (date) \_\_\_\_\_ by (name) \_\_\_\_\_. The State of California requires the system to be flushed after standing at least one week after the fill date specified above. If this system is used earlier than one week after the fill date, the water must be allowed to run for at least two minutes prior to use for human consumption.

**Any contractor or subcontractor found to have failed to comply with the PEX flushing requirements shall be subject to the penalties per Health and Safety Code, Division 13, Part 1.5, Chapter 6 (Section 17995, et seq.).**

**This form must be completed and available to the Building Inspector at the time of final inspection.**

Plumbing Contractor: \_\_\_\_\_ License #: \_\_\_\_\_

\_\_\_\_\_  
Plumbing Contractor Signature Date

Licensed Contractor: \_\_\_\_\_ License #: \_\_\_\_\_

\_\_\_\_\_  
Licensed Contractor Signature Date