

Attention: Inspection – Backflow Prevention Section

SUBJECT: Test and Maintenance Report - Backflow Prevention Assembly (Circle One) RP DC PVB SPVB RPDA DCDA

Please be advised that we have made the following periodic test as required by the San Antonio Water System Cross Connection Control Program and report the following:

Name and Model of Assembly _____ Assembly Serial # _____ Size _____

DCDC By Pass Assembly _____ Assembly Serial # _____ Size _____

Service Address _____ Acct # _____ Gauge # _____

CHECK #1 VALVE	M A I N		CHECK #2 VALVE	M A I N		DIFF. PRESSURE RELIEF VALVE	DOUBLE CHECK DETECTOR ASSEMBLY
	B Y P A S S	() ()		B Y P A S S	() ()		
INITIAL TEST	1. Leaked	() ()	1. Leaked	() ()	Opened at _____ PSID	P.S.I. Drop Leaking () Did Not Open ()	P.S.I. Drop Mainline D/C Check # 1 _____ Check # 2 _____ By-Pass D/C Check #1 _____ Check # 2 _____
	2. Closed Tight	() ()	2. Closed Tight	() ()			
R E P A I R S	Cleaned	() ()	Cleaned	() ()	Cleaned	()	Water Meter Test Meter Reading Prior To D/C Test _____
	Replaced:	() ()	Replaced:	() ()	Replaced:	()	
	Disc	() ()	Disc	() ()	Disc:	()	
	Spring	() ()	Spring	() ()	Upper	()	
	Guide	() ()	Guide	() ()	Lower	()	
	Pin Retainer	() ()	Pin Retainer	() ()	Spring	()	
	Hinge Pin	() ()	Hinge Pin	() ()	Diaphragm:	()	
	Seat	() ()	Seat	() ()	Large:	()	
	Diaphragm	() ()	Diaphragm	() ()	Upper	()	
	Other, describe	() ()	Other, describe	() ()	Lower	()	
				Small	()	Opened # 4 Test Cock Meter Registers Yes _____ No _____	
				Seat:	()		
				Upper	()	Meter Reading upon Completion _____	
				Lower	()		
				Spacer:	()	Comments: _____ _____ _____	
				Lower	()		
				Other, describe	()		
FINAL TEST	P.S.I. Drop (R/P) _____ Closed Tight () ()		Closed Tight () ()		Opened at _____ PSID		

CERTIFICATIONS:

1. I hereby certify that the foregoing data is accurate and reflects the proper operation and maintenance of the captioned equipment. I personally performed or directly supervised the field test herein described.

DATE SIGNATURE CERTIFIED TESTER TESTER #

TIME AM () PM () TESTING COMPANY PHONE NUMBER

2. I hereby certify the assembly has been in constant use at this location in a manner approved by the San Antonio Water System during the entire prescribed interval between test periods and during this period this assembly was not by-passed, made inoperative or removed without proper authorization. All defects found during the operating period or during tests of the assembly were immediately corrected to the specification and approval of the San Antonio Water System.

FIRM NAME ADDRESS

TELEPHONE NO. TITLE DATE

SIGNATURE OWNER OR REPRESENTATIVE