

Texas Commission on Environmental Quality
BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water supplier for recordkeeping *purposes:

NAME OF PWS:	City of Leander
PWS ID#:	2460012
MAILING ADDRESS:	PO Box 319 Leander, TX 78646
CONTACT PERSON:	Christi Williams
LOCATION OF SERVICE:	3033 Scout Pony Dr.

The backflow prevention assembly detailed below has been tested and maintained as required by commission regulations and is certified to be operating within acceptable parameters.

- TYPE OF ASSEMBLY:**
- | | |
|--------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Reduced Pressure Principle | <input type="checkbox"/> Reduced Pressure Principle-Detector |
| <input checked="" type="checkbox"/> Double Check Valve | <input type="checkbox"/> Double Check-Detector |
| <input type="checkbox"/> Pressure Vacuum Breaker | <input type="checkbox"/> Spill-Resistant Pressure Vacuum Breaker |

Manufacturer:	Febco	Size:	1"
Model Number:	850	Located At:	9' WSW OF METER
Serial Number:	HD 99488		

Is the assembly installed in accordance with manufacturer recommendations and/or local codes? Yes No

	Reduced Pressure Principle Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1 st Check	2 nd Check			
Initial Test	Held at <u>2.3</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>2.3</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at ___ psid Did not open <input type="checkbox"/>	Opened at ___ psid Did not open <input type="checkbox"/>	Held at ___ psid Leaked <input type="checkbox"/>
Repairs and Materials Used**					
Test After Repair	Held at ___ psid Closed Tight <input type="checkbox"/>	Held at ___ psid Closed Tight <input type="checkbox"/>	Opened at ___ psid	Opened at ___ psid	Held at ___ psid

Test gauge used:

Make/Model:	Midwest / 845-3	SN:	06111314	Date tested for accuracy:	06/01/2017
Remarks:	None				

The above is certified to be true at the time of testing.

Firm Name:	L Sinclair Services Inc.	Certified Tester Name (Print/Type):	Lewis R. Sinclair
Firm Address:	Cedar Park, TX 78613	Certified Tester Name (Signature):	<i>Lewis R. Sinclair</i>
Firm Phone #:	512-563-8762	Cert. Tester No.:	BP0002815
		Date of Test:	07/07/17

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS
 ** USE ONLY MANUFACTURER'S REPLACEMENT PARTS