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

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| | | t be completed for | | | ned and | l dated original must | be submi | itted to the public water suppli | er for recordkee | ping *purposes: | | | |
|--|---|--|-----------------|--------------------------|-----------------------------------|---|----------------|----------------------------------|------------------|-----------------|--|--|--|
| NAME OF PWS: | | | City of Leander | | | | | | | | | | |
| PWS ID#: 2460012 | | | | | | | | | | | | | |
| PWS MAILING ADDRESS: P.O. Box 319 Leander, | | | | | | | | | | | | | |
| PWS CONTACT PERSON: Christi Williams | | | | | | | | | | | | | |
| ADDRESS OF SERVICE: 2625 San Marine Dr. MARTINO 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 BACKFLOW PREVENTION ASSEMBLY (BPA): | | | | | | | | | | | | |
| | Reduced Pr | ressure Principle (RPBA) Reduced Pressure Principle-Detector (RPBA-D) | | | | | | | | | | | |
| × | Double Che | heck Valve (DCVA) Double Check-Detector (DCVA-D) | | | | | | | | | | | |
| □ Pressure Vacuum Breaker (PVB) □ Spill-Resistant Pressure Vacuum Breaker (SVB) | | | | | | | | | | | | | |
| Manu | Manufacturer: Febco Size: 1" | | | | | | | | | | | | |
| Model Number: 850 | | | | BPA Location: | | | 7 WNW OF METER | | | | | | |
| | Number: | 1. | 20 2 | <u> </u> | | BPA Serve | | Residential Landscape Irrigation | | | | | |
| Serial Number: HE 51304 BPA Serves: Residential Landscape Irrigation | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Reason for test: New 🗵 Existing 🗆 Replacement 🗆 Old Model/Serial # Is the assembly installed in accordance with manufacturer recommendations and/or local codes? 🖾 Yes 🗀 No | | | | | | | | | | | | | |
| | | | | | | | ons and | d/or local codes? | ☑ Yes | □ No | | | |
| Is the | assembly ins | talled on a no | n-pot | able water supp | oly (a | uxiliary)? | | | ☐ Yes | ⊠ No | | | |
| ` · · · · · | | Raduand Proc | SCHEO. | Dringinla Agear | nhlrr | (DDDA) | | DV/D | & SVB | | | | |
| | | Reduced Fies | | Principle Asser | погу | (KPDA) | | FVD | LASAD | 211112112 | | | |
| DCVA | | | | | Dakatval | | A in Inlat | Check Valve | | | | | |
| 1 st Check | | | ζ. | 2 nd Check** | Relief Valve | | Air Inlet | | | | | | |
| Initial | Test | Held at 7.5 | psid | Held at Z | esid | Opened at | psid | Opened atpsid | Held at | psid | | | |
| Date: 232 113 146 Closed Tight TV Closed | | | Closed Tight | X | Did not open | | Did not open | Leaked | | | | | |
| Date: 72/13/16 Closed Tight X Closed Tight X Did not open | | | | | | | Lountou | _ | | | | | |
| | C->>517 | Leaked | | Leakeu | ш | | | Did it fully open | | | | | |
| | | | | | | | (Yes □ /No □) | · | | | | | |
| | | | | | | | | (163 🗆 710 🗀) | <u> </u> | | | | |
| Repair | | | | | | | | | | | | | |
| Materi | als Used** | | | | | | | | | | | | |
| | | 5 St 2565 5565 | | M ANNOUNCE | | | | 1000000000 1000 | | 10 (20 %) | | | |
| Test A | fter | Held at | psid | Held at | osid | Opened at | psid | Opened at psid | Held at | psid | | | |
| Repai | | Closed Tight | • | Closed Tight | • | | | 1 | _ | | | | |
| Date: | - | Closed Fight | | Closed Figure | | | | | | | | | |
| Time: | | | | | | BD 1983/770 BBY100399403429 CERWIN | | | | | | | |
| 1 | | *** 2nd check | :: nun | neric reading re | quire | d for DCVA or | nly | | | | | | |
| Diffe | rential pressi | ire gauge use | | | | Potable: 🛛 | | Non-Potable: | | | | | |
| | | /Iidwest / 845- | | SN: | | 111314 | I | Date tested for accurac | v: 06/0 | 1/2017 | | | |
| | | | | | | | | | * | | | | |
| Rema | arks: 1 | None | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | · | | | | Index. | | | | 7 | | | |
| Company Name: L Sinclair Services Inc. Lice | | | | | | ensed Tester Name (Print/Type): Lewis R. Sinelair : | | | | | | | |
| Company Address: Cedar Park, TX 78613 | | | | | Licensed Tester Name (Signature): | | | | | | | | |
| Company Phone #: 512-563-8762 | | | | BPAT License # BP0002815 | | | | | | | | | |
| License Expiration Date: 02/12/2020 | | | | | | | | | | | | | |
| TEST RESULT | | | | | | | | | | | | | |
| | | | | | | t the time of te | | | PA: | SS 🔼 | | | |
| * 7767 | የፒ ይይረ ሳይ፤ | * TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS [30 TAC §290.46(B)] | | | | | | | | | | | |
| ** USE ONLY MANUFACTURER'S REPLACEMENT PARTS FAIL | | | | | | | | | | | | | |