

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

*DCES*

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:	
PWS ID#:	
PWS MAILING ADDRESS:	
PWS CONTACT PERSON:	
ADDRESS OF SERVICE:	6013 Osceola Trail

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):**

<input type="checkbox"/>	Reduced Pressure Principle (RPBA)	<input type="checkbox"/>	Reduced Pressure Principle-Detector (RPBA-D)
<input checked="" type="checkbox"/>	Double Check Valve (DCVA)	<input type="checkbox"/>	Double Check-Detector (DCVA-D)
<input type="checkbox"/>	Pressure Vacuum Breaker (PVB)	<input type="checkbox"/>	Spill-Resistant Pressure Vacuum Breaker (SVB)

Manufacturer:	Febco	Size:	1"
Model Number:	850	BPA Location:	<i>3' ESE OF METER</i>
Serial Number:	<i>HE49248</i>	BPA Serves:	Residential Landscape Irrigation

Reason for test:	New <input checked="" type="checkbox"/>	Existing <input type="checkbox"/>	Replacement <input type="checkbox"/>	Old Model/Serial #
Is the assembly installed in accordance with manufacturer recommendations and/or local codes?	<input checked="" type="checkbox"/> Yes			<input type="checkbox"/> No
Is the assembly installed on a non-potable water supply (auxiliary)?	<input type="checkbox"/> Yes			<input checked="" type="checkbox"/> No

	Reduced Pressure Principle Assembly (RPBA)		Relief Valve	PVB & SVB	
	DCVA			Air Inlet	Check Valve
	1 <sup>st</sup> Check	2 <sup>nd</sup> Check***			
<b>Initial Test</b> Date: <i>03/15/18</i> Time: <i>10:50 AM</i>	Held at <i>2.4</i> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <i>2.4</i> 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"/>  Did it fully open (Yes <input type="checkbox"/> /No <input type="checkbox"/> )	Held at ___ psid Leaked <input type="checkbox"/>
<b>Repairs and Materials Used**</b>					
<b>Test After Repair</b> Date: Time:	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

\*\*\* 2<sup>nd</sup> check: numeric reading required for DCVA only

Differential pressure gauge used:	Potable: <input checked="" type="checkbox"/>	Non-Potable: <input type="checkbox"/>
Make/Model: <i>Midwest / 845-3</i>	SN: <i>06111314</i>	Date tested for accuracy: <i>06/01/2017</i>

Remarks:	<i>None</i>
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Company Name:	<i>L Sinclair Services Inc.</i>	Licensed Tester Name (Print/Type):	<i>Lewis R. Sinclair</i>
Company Address:	<i>Cedar Park, TX 78613</i>	Licensed Tester Name (Signature):	<i>[Signature]</i>
Company Phone #:	<i>512-563-8762</i>	BPAT License #	<i>BP0002815</i>
		License Expiration Date:	<i>02/12/2020</i>

<b>TEST RESULT</b>
PASS <input checked="" type="checkbox"/>
FAIL <input type="checkbox"/>

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

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS [30 TAC §290.46(B)]

\*\* USE ONLY MANUFACTURER'S REPLACEMENT PARTS