

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:	Dripping Springs WSC
PWS ID#:	1050013
PWS MAILING ADDRESS:	101 Hays St. Ste. 406 Dripping Springs Tx 78620
PWS CONTACT PERSON:	Coralin Taylor
ADDRESS OF SERVICE:	149 Yarbrough, Dripping Springs, TX 78620

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:	Left front at the meter
Serial Number:	HF61554	BPA Serves:	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

TEST RESULT	Reduced Pressure Principle Assembly (RPBA)			PVB & SVB	
	DCVA		Relief Valve	Air Inlet	Check Valve
	1 st Check	2 nd Check***			
PASS <input checked="" type="checkbox"/> FAIL <input type="checkbox"/>	Held at 2.4 psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at 2.2 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"/>
Initial Test Date: 11/12/2021 Time: 3:30 pm					
Repairs and Materials Used**					
Test After Repair 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	

*** 2nd check: numeric reading required for DCVA only

Differential pressure gauge used:	Potable: <input checked="" type="checkbox"/>	Non-Potable: <input type="checkbox"/>
Make/Model: Bac Flo 5	SN: 06163433	Date tested for accuracy : 10/11/2021

Remarks:	

Company Name:	1st Fire Safety	Licensed Tester Name (Print/Type):	Scott Stevenson
Company Address:	PO Box 1238 Cedar Park, Tx 78613	Licensed Tester Name (Signature):	<i>Scott Stevenson</i>
Company Phone #:	512-777-1555	BPAT License #	BP0017507
		License Expiration Date:	12/21/2022

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