## City of Georgetown - Backflow Prevention Assembly Test and Maintenance Report

The following form must be completed for each assembly tested for recordkeeping \*purposes:

	City of Georgetown PO Box 1430 Georgetown, Texas 78626			WS ID: ontact Name: hone Number:	2460001 Water Regulatory 512-930-3640		
			BPAT Info	rmation			
Company Name: Tester Name: Address:	Brad V 609 E	•	E	hone Number: mail Address: icense Number: icense Expiration	5126059790 brad@safewateratx.com BP0016935 12/3/2024		
	Loc	ocation Information		Contact Information			
Property Type: Business Name: Property Address:		ntial ellborn Rd Hill, TX 78642	C M P	ompany Name: ontact Name: lailing Address: hone Number: mail Address:	265 Wellborn Rd Liberty Hill, TX 78642		
			Backflow In	formation			
acceptable parameters. Backflow Method: Main Assembly Manufa Location: Hazard Type ****: Test Result: Reason for Test:	rcturer: 7' NNE Irrigatio Passeo Replac	Reduced Pressure Principl Febco Mo of Meter on - Non Chemical	e odel: 860 Backflow Test rial #: HA02591	Size: 1 Information	Serial Number: HA		
-		on-potable water supply (aux			1 105		
Differential pressure gauge used:		st 845-5 (potable)	Serial Number	er:         10150482         Date Tested for Accuracy:         10/5/2022			
Reduced Pressure Principle							
		Check Valve #1	Check Va		Relief Valve		
Initial Test Date: 2/24/2023 Time: 3:45 PM		Held at 8.4 PSID ClosedTight Leaked	Held at 0 PSID		pened at 3.7 PSID ] Did not open		
Repairs and Materials Used							
Repair Details			-				
Test After Repairs		Held at 0 PSID	Held at 0 PSID	Oţ	pened at 0 PSID		
			Rema	rks		1	

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 \*\*\* 2nd Check: Numeric reading required for double check valve only. \*\*\*\* Indicates additional information not present on the standard TCEQ report