## 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: |              |  |       |   |                     |   |                |                            |                   |                                |             | *purposes: |  |
|--|--------------|--|-------|---|---------------------|---|----------------|----------------------------|-------------------|--------------------------------|-------------|------------|--|
| NAME OF PWS:   |              |  |       | Parten Ranch WTCPUA   |                     |   |                |                            |                   |                                |             |            |  |
| PWS ID#:   |              |  |       | 2270235   |                     |   |                |                            |                   |                                |             |            |  |
| PWS MAILING ADDRESS:   |              |  |       | 13215 Bee Cave Pkwy Building B Suite 110 Bee Caves, TX 7738 |                     |   |                |                            |                   |                                |             |            |  |
| PWS CONTACT PERSON: WTC  |              |  |       |   | VTCPUA Backflows    |   |                |                            |                   |                                |             |            |  |
| ADDF   | RESS OF S    | SERVICE:   |       | 170 Fireside  | Rd. A               | Austin, TX 78737                              |                |                            |                   |                                |             |            |  |
| The backflow prevention assembly detailed below has been tested and maintained as required by commission regulation  |              |  |       |   |                     |   |                |                            |                   |                                |             | ations     |  |
| and is   | certified to | be operating   |       |   |                     |   |                |                            | -                 |                                |             |            |  |
|  |              |  | TYF   | E OF BAC  | KFLO                | W PREVENT                                     | ON ASSE        | EMBLY                      | (BPA):            |                                |             |            |  |
|  | Reduced      | Pressure Principle (RPBA) Reduced Pressure Principle-Detector (RPBA-D) Type II |       |   |                     |   |                |                            |                   |                                |             |            |  |
| ■ Double Check Valve (DCVA   |              |  |       | VA)   |                     | Double Check-Detector (DCVA-D)  Type II □     |                |                            |                   |                                |             |            |  |
| Pressure Vacuum Breaker (PVB)  |              |  |       |   |                     | Spill-Resistant Pressure Vacuum Breaker (SVB) |                |                            |                   |                                |             |            |  |
| Manufacturer: Main: Febco  |              |  | 0     |   | Bypass              |   |                |                            |                   |                                |             |            |  |
| Model Number:  |              | Main: 850  |       |   | Bypass:             | ypass:  |                | BPA Location:              |                   | Left front yard 5ft from meter |             |            |  |
| Serial   | Number:      | Main HG25541 Byp   |       |   |                     | ss: BPA Serves: Irrig                         |                |                            | Irrigation        | rigation                       |             |            |  |
|  |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
| Reason for test: New ⊠ Existing □ Replacement □ Old Model/Serial #   |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
| Is the assembly installed in accordance with manufacturer recommendations and/or local codes?  |              |  |       |   |                     |   |                |                            |                   |                                | $\log N_0$  |            |  |
| Is the assembly installed on a non-potable water sup   |              |  |       |   |                     |   |                |                            |                   |                                |             | No No      |  |
|  |              |  |       |   | ст зарр             | <u> </u>                                      |                |                            |                   | Ц                              | res         | ∆I N0      |  |
| TEST 1   | RESULT       |  |       |   |                     |   | Type II        |                            |                   |                                |             |            |  |
|  |              | Reduced Pressure Principle Assemb  |       |   |                     | ly (RPBA)                                     | Assembly       |                            | PVB & SVB         |                                |             |            |  |
| PASS 🛛   |              | DCVA   |       |   |                     |   |                |                            |                   |                                |             |            |  |
| FAIL   |              | 1st Check 2nd Check*   |       |   | ***                 | Relief Valve                                  | Bypass Check   |                            | Air Inlet         |                                | Check Valve |            |  |
| 1 Cheek  |              |  |       |   |                     |   |                |                            | [ 1               |                                |             |            |  |
| Initial '  |              | Held at _1.9   |       | Held at 2.1   | — ř                 | Opened at                                     | Held at        | — ř                        | Opened at         | psid                           | Held at     |            |  |
| Date: 7/27/2022<br>Time: 12:45PM   |              | Closed Tight Closed Tight Leaked Leaked  |       |   | t 🔼                 | psid<br>Did not                               |                |                            | Did not open      | psid                           |             |            |  |
|  |              |  |       |   |                     |   | Leaked         | — "                        | oid it fully open |                                | Leaked      |            |  |
|  |              |  |       |   | ,                   | open $\square$                                |                |                            | Yes □ /No □)      |                                |             |            |  |
| Repairs  | and          | Main:  |       |   |                     |   |                |                            |                   |                                |             |            |  |
| Materia  | ıls          |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
| Used**   |              | Bypass:  |       |   |                     |   |                |                            |                   |                                |             |            |  |
| Test After Repair Date:  |              | Held at psid Held at p<br>Closed Tight Closed Tight                            |       |   | psid                | Opened at                                     | Held at psid C |                            | Opened at psid    |                                | Held at     |            |  |
|  |              |  |       |   | ht 🔲                | psid  | Closed         |                            | 1                 |                                | psid        |            |  |
|  |              |  |       |   |                     | Tight □                                       |                |                            |                   |                                |             |            |  |
| Time:  |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
|  |              | *** 2 <sup>nd</sup> che  | ck: n | umeric read   | ing req             | uired for DCVA                                | only           |                            |                   |                                | <u>!</u>    |            |  |
| Differential pressure gauge used:  |              |  |       |   | <u> </u>            | Potable:  Non-Pota                            |                |                            |                   |                                |             |            |  |
| Make/Model: MidWest 845  |              |  |       | SN:   | 10150482 Date teste |   |                | ed for accuracy: 10/7/2021 |                   |                                |             |            |  |
| Remarks:   |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
|  |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
|  |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
| Compa  | any Name:    | Safewater Backflow   |       |   |                     | Licensed Tester Name Brad Weyant              |                |                            |                   |                                |             |            |  |
|  |              |  |       |   |                     | (Print/Type):                                 |                |                            |                   |                                |             |            |  |
| Compa  | any Addre    | 78765  |       |   | X                   | Licensed Tester Name (Signature):             |                |                            |                   |                                |             |            |  |
|  |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
| Compa  | any Phone    |  |       |   |                     | BPAT License # BP0016935                      |                |                            |                   |                                |             |            |  |
| License Expiration Date: 12/3/2024   |              |  |       |   |                     |   |                |                            |                   |                                |             |            |  |
|  |              | ·  |       |   |                     | ied to be true e                              |                |                            | <u></u>           | _                              | ·           |            |  |

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