City of Georgetown - Backflow Prevention Assembly Test and Maintenance Report

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

| | PO Bo | Georgetown x 1430 etown, Texas 78626 | | PWS ID: Contact Name: Phone Number: | 2460001 Water Regulatory 512-930-3640 | | |
|--|-------------------------|---|----------------------------|---|--|---------------------------|--|
| | | | BPAT Ir | nformation | | | |
| Company Name: Tester Name: Address: | Brad W 609 E s | | | Phone Number: 5126059790 Email Address: brad@safewateratx.com License Number: BP0016935 License Expiration: 12/3/2024 | | | |
| Location Information | | | | Contact Information | | | |
| Property Type: Business Name: Property Address: | | ntial ardusty Hill, TX 78642 | | Company Name Contact Name: Mailing Address Phone Number: Email Address: | s: 119 Stardusty Liberty Hill, TX 78642 | - | |
| | | | Backflow | Information | | | |
| The backflow prevention acceptable parameters. | assembly | y detailed below has been tes | ted and maintained a | as required by con | nmission regulations and is certifi | ed to be operating within | |
| Backflow Method: Main Assembly Manufa Location: Hazard Type ****: | Left fro | Reduced Pressure Princip Apollo N ont yard 5 feet from meter on - Non Chemical | ole Iodel: RP4A | Size: | 1 Serial Number: 31 | 370C | |
| | | | Backflow Te | est Information | | | |
| - | ed in acco ed on a n | d Istallation ordance with manufacturers on-potable water supply (au st 845-5 (potable) | | | des? Yes Date Tested for Acc | uracy: 10/4/2023 | |
| gauge used: | | | | | | _ | |
| | | | Reduced Pressure Principle | | | | |
| Initial Test Date: 12/21/2023 Time: 3:15 PM | | Check Valve #1 Held at 7.8 PSID ClosedTight Leaked | Check Held at 0 PSID | | Relief Valve Opened at 3.2 PSID Did not open | | |
| Repairs and Materials Used | | | | | | | |
| Repair Details | | | | | i | 4 | |
| Test After Repairs | | Held at 0 PSID | Held at 0 PSID | | Opened at 0 PSID | | |
| | | | Ren | narks | I | - | |

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