

City of Pflugerville - PWSID #2270014



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 record keeping purposes

| | | | |
|---------------------------|---|-------------------|--|
| Customer Information | | PWS Information | |
| Customer / Property Name: | Resident | PWS Contact Name: | Aaron Griffith |
| Contact Name: | | PWS Phone Number: | (512) 990-6427 |
| Property Address: | 1704 Carvin Way Pflugerville, TX 78660 | PWS Address: | 15500 Sun Light Near Way #B Pflugerville, TX, 78691 |

The backflow prevention assembly detailed below has been tested as required by TCEQ regulations and is certified to be operating within acceptable parameters.

| | | | | | |
|---|--|-------------|-------------------|-------------|------------------------------|
| Assembly Information | | Model #: | | PASS | Test Date: 2023-10-02 |
| Type: | DC | Serial#: | DC4A | | |
| Size: | 1" | BPA Serves: | 53143C | | |
| Manufacturer: | Apollo | | Irrigation | | |
| Location: | Left front yard 5 feet from meter | | | | |
| Reason for test: <input checked="" type="checkbox"/> new <input type="checkbox"/> existing <input type="checkbox"/> replaced. | | | | | |
| Is the assembly installed in accordance with manufacturer recommendations and/or local codes? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no | | | | | |
| Water supply: Potable | | | | | |

Assembly Test Information

| | |
|--|--|
| Initial Test (Time: 11:40 am) | |
| Check Valve #1 : 1.6 <input checked="" type="checkbox"/> Closed Tight/Held <input type="checkbox"/> Leaked | Check Valve #2 : 1.7 <input checked="" type="checkbox"/> Closed Tight/Held <input type="checkbox"/> Leaked |
| Final Test | |
| Check Valve #1 : 1.6 <input checked="" type="checkbox"/> Closed Tight/Held <input type="checkbox"/> Leaked | Check Valve #2 : 1.7 <input checked="" type="checkbox"/> Closed Tight/Held <input type="checkbox"/> Leaked |

As the tester of record, I affirm this test as: Passed Failed **Repairs Made:** No**

Additional comments or repairs made / materials (parts) used:
(no comments)

| | | |
|------------------------------------|--|---|
| Tester Information | | Custom Questions |
| Tester Name: | Weyant, Brad | Is the assembly installed in accordance with manufacturer recommendations and / or local codes? Y/N Y Bypass identifying information (manufacturer, model, serial number, and size) |
| Tester License Expiration: | 12-03-2024 | |
| Certification#: | BP0016935 | |
| Test Kit Serial #: | 10150482 | |
| Test Kit Date Tested for Accuracy: | 10-05-2022 | |
| Test Kit Mfr. & Mod. #: | Mid-West 845-5 (Potable) | |
| Testing Co Name: | Safewater Backflow and Irrigation | |
| Phone: | (512) 605-9790 | |
| Address: | PO Box 4002 Austin, TX 78765 | |

The above tester certifies that all information submitted for this report is true and accurate
 * TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS [30 TAC §290.46(B)]
 ** USE ONLY MANUFACTURER'S REPLACEMENT PARTS
 The backflow prevention assembly detailed above has been tested and maintained as required by commission regulations and is certified to be operating within acceptable parameters