



# NEW INSTALLATION

## CROSS CONNECTION SECTION TEST AND MAINTENANCE REPORT

Bldg. Permit #: \_\_\_\_\_

Company Name: Geoscapes of Texas inc.  
 Address: P.O. Box 1922 Leander, TX, 78646  
 City, St. and Zip: Leander, TX, 78646  
 Telephone: (512) 529-1605  Certified Fire Line Contractor  Fire Line Test  
 Commercial Property?  Yes  No

Address: 1704 Sawmill Xing

Owner/Business Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Model Number: 850 Size: 1"

Device Location: 12' post meter toward house Serial Number: HF27410

Manufacturer: Febco

Reason Device is Installed: Irrigation

Has this device been installed according to manufacturer's specs or code?  Yes  No

	REDUCED PRESSURE PRINCIPLE ASSEMBLY		PRESSURE VACUUM BREAKER		
	DOUBLE CHECK ASSEMBLY		Relief Valve	Air Relief	Check Valve
	1st Check	2nd Check			
<b>Initial Test</b>	DC Closed tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/> PSI <u>2.3</u> RPZ _____ PSID	Closed tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/> PSI <u>2.1</u>	Opened at _____ PSID	Opened at _____ PSID  Did not open <input type="checkbox"/>	Closed at _____ PSID  Did not close <input type="checkbox"/>
<b>Materials &amp; Repairs</b>					
<b>Test After Repairs</b>	DC Closed tight <input type="checkbox"/> PSI _____ RPZ _____ PSID	Closed tight <input type="checkbox"/> PSI _____	Opened at _____ PSID	Opened at _____ PSID	Closed at _____ PSID

The above is certified to be true

Gauge Sr. #: 574997 Calibration Date: 1/19/23

Property Owner/Occupant: \_\_\_\_\_

Certified Tester (Signature): Thomas Money

Mailing Address: 1704 Sawmill Xing

Tester Name (Print): Thomas Money

City, State, Zip: Round Rock, TX, 78665

Tester Cert. #: BP0016285

Owner/Contact: \_\_\_\_\_

Date: 10/17/23 2:05 pm

City of Round Rock, Building Inspection Dept.  
 2008 Enterprise Drive, Round Rock, TX 78664  
 512-218-5550