

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

PWS ID: 2460001
Contact Name: Water Regulatory
Phone Number: 512-930-3640

BPAT Information

Company Name: Safety Plus Services, LLC.
Tester Name: Scott Stevenson
Address: 102 Wonder World Drive, Suite #304-522
 San Marcos, Texas 78666

Phone Number: 512-300-9659
Email Address: scott@safetyplusservices.com
License Number: BP0017507
License Expiration: 12/19/2025

Location Information

Property Type: Residential
Business Name:
Property Address: 417 Terrene Trl
 Andice, TX 78628

Contact Information

Company Name:
Contact Name:
Mailing Address: 417 Terrene Trl
 Andice, TX 78628
Phone Number:
Email Address:

Backflow Information

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

Backflow Method: Double Check Valve
Main Assembly Manufacturer: Apollo **Model:** DC4A **Size:** 1 **Serial Number:** 85626C
Location: At meter
Hazard Type **:** Irrigation - Non Chemical

Backflow Test Information

Test Result: Passed
Reason for Test: New Installation

Is the assembly installed in accordance with manufacturers recommendations and/or local codes? Yes

Is the assembly installed on a non-potable water supply (auxiliary)? No

Differential pressure gauge used: BacFlo Unlimited Bac Flo 5 (potable) **Serial Number:** 06163433 **Date Tested for Accuracy:** 10/11/2023

	Double Check Valve	
	Check Valve #1	Check Valve #2
Initial Test Date: 6/10/2024 Time: 3:13 PM	Held at 2 PSID <input checked="" type="checkbox"/> ClosedTight <input type="checkbox"/> Leaked	Held at 2.2 PSID <input checked="" type="checkbox"/> ClosedTight <input type="checkbox"/> Leaked
Repairs and Materials Used		
Repair Details		
Test After Repairs	Held at 0 PSID <input type="checkbox"/> Closed Tight	Held at 0 PSID <input type="checkbox"/> Closed Tight

Remarks

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