



# Backflow Prevention Test & Maintenance Report

City of Hutto Development Services & Code Enforcement  
 500 W. Live Oak Street  
 Hutto, Texas 78634  
 Phone: 512-759-5971  
 Fax: 512-759-5962  
 building@huttotx.gov  
[www.huttotx.gov/developmentservices](http://www.huttotx.gov/developmentservices)

The following form must be completed for each assembly tested. A signed and dated **ORIGINAL** must be submitted to the City of Hutto for records purposes.\* Illegible or incomplete reports will not be accepted.

RESIDENTIAL

COMMERCIAL

CUSTOMER INFORMATION			
PROPERTY OWNER / BUSINESS / AGENT Highland Homes			
MAILING ADDRESS 111 Corn Street		CITY Hutto, TX 78634	STATE TX
BACKFLOW ASSEMBLY INFORMATION			
OCCUPANT / BUSINESS NAME Highland Homes			
SERIAL # 01390D	MANUFACTURER Apollo	MODEL DC4A	SIZE 1"
PHYSICAL ADDRESS 111 Corn Street		ASSEMBLY LOCATION ON PROPERTY Left front yard 5 feet from meter	
PUBLIC WATER SYSTEM I.D # TX2460007		PURPOSE OF ASSEMBLY Irrigation	
TYPE OF ASSEMBLY			
<input type="checkbox"/> Reducer Pressure Assembly		<input type="checkbox"/> Reducer Pressure Principle-Detector Double	
<input checked="" type="checkbox"/> Double Check Valve Pressure		<input type="checkbox"/> Check-Detector	
<input type="checkbox"/> Vacuum Breaker		<input type="checkbox"/> Spill-Resistant Pressure Vacuum Breaker	
Is the assembly installed in accordance with manufacturer recommendations and/or local codes? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			

**THE BACKFLOW PREVENTION ASSEMBLY DETAILED BELOW HAS BEEN TESTED AND MAINTAINED AS REQUIRED BY TCEQ REGULATIONS AND IS CERTIFIED TO BE OPERATING WITHIN ACCEPTABLE PARAMETERS.**

	REDUCER PRESSURE BACKFLOW PREVENTION ASSEMBLY		PRESSURE VACUUM BREAKER		
	DOUBLE-CHECK VALVE ASSEMBLY		RELIEF VALVE	AIR INLET	CHECK VALVE
	1 <sup>ST</sup> CHECK	2 <sup>ND</sup> CHECK			
<b>INITIAL TEST</b>	Held at 2.0 PSI Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at 1.9 PSI Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ PSI Did not oper <input type="checkbox"/>	Opened at _____ PSI Did not oper <input type="checkbox"/>	Held at _____ PSI Leaked <input type="checkbox"/>
<b>TEST AFTER REPAIRS</b>	Held at _____ PSI Closed Tight <input type="checkbox"/>	Held at _____ PSI Closed Tight <input type="checkbox"/>	Opened at _____ PSI	Opened at _____ PSI	Held at _____ PSI
<b>REPAIRS AND MATERIALS USED **</b>					
<b>TEST GAUGE USED</b>	MAKE/MODEL Mid West 845	Gauge SERIAL #: 09231317	CALIBRATION DATE: 3/14/2024		
<b>REMARKS</b>					

**I CERTIFY ALL INFORMATION ON THIS REPORT IS TRUE AND CORRECT AS OF THE DATE OF THIS TEST.**

COMPANY NAME Safewater Backflow		COMPANY ADDRESS PO Box 4002 Austin, TX 78765	CITY TX	ST TX	ZIP 78765
BACKFLOW TECH NAME Brad Weyant	CERTIFICATION # BP0016935	PHONE 512 605 9790	FAX		
BACKFLOW TECHNICIAN SIGNATURE 				DATE 11/15/2024	

\*TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS.

\*\*USE ONLY MANUFACTURES REPLACEMENT PARTS.