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		PWS ID:	2460001
	PO Box 1430 Georgetown, Texas 78626		Contact Name: Phone Number:	Water Regulatory 512-930-3640
		BPAT lı	nformation	
Company Name: Tester Name: Address:	Safewater Backflow and Irrigatic Brad Weyant 609 E 50TH AUSTIN, Texas 78751	n	Phone Number: Email Address: License Number: License Expiration:	5126059790 brad@safewateratx.com BP0016935 12/3/2024
	Location Information			Contact Information
Property Type: Business Name: Property Address:	Residential 141 Golden Sage Ave Georgetown, TX 78633		Company Name: Contact Name: Mailing Address: Phone Number: Email Address:	141 Golden Sage Ave Georgetown, TX 78633
		Backflow	Information	
The backflow prevention acceptable parameters.	assembly detailed below has beer	n tested and maintained	as required by commission	on regulations and is certified to be operating within
Backflow Method: Main Assembly Manufa Location: Hazard Type ****:	Double Check Valve acturer: Apollo Left front yard 5 feet from meter Irrigation - Non Chemical	Model: DC4A	Size: 1	Serial Number: 53297C
	0	Backflow Te	est Information	
Test Result: Reason for Test: Is the assembly installe	Passed New Installation ed in accordance with manufactu	irers recommendations	s and/or local codes? Y	/es
Is the assembly installe	ed on a non-potable water supply	/ (auxiliary)? No		
Differential pressure gauge used:	MidWest 845-5 (potable)	Serial Num	ber: 09231317	Date Tested for Accuracy: 3/14/2024
	Double Check Valve			
	Check Valve #1	Check	Valve #2	
Initial Test Date: 7/2/2024 Time: 5:05 PM Repairs and	Held at 2.1 PSID	Held at 0 PSID		
Materials Used				
Repair Details				
Test After Repai Date: 7/2/2024 Time: 5:10 PM	rs Held at 2.1 PSID ✓ Closed Tight	Held at 1.9 PS		
		Rer	narks	

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