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: Contact Name Phone Numbe	
		BPAT Information	
Company Name: Tester Name: Address:	Safewater Backflow and Irrigation Brad Weyant 609 E 50TH AUSTIN, Texas 78751	Phone Numbe Email Address License Numb License Expira	s: brad@safewateratx.com ber: BP0016935
	Location Information		Contact Information
Property Type: Business Name: Property Address:	Residential 1517 Jay Wolf Dr Georgetown, TX 78628	Company Nan Contact Name Mailing Addres Phone Numbe Email Address	e: ss: 1517 Jay Wolf Dr Georgetown, TX 78628 er:
		Backflow Information	
The backflow prevention acceptable parameters.	assembly detailed below has been te		ommission 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: 89042C
		Backflow Test Information	1
-		rs recommendations and/or local co	odes? Yes
-	ed on a non-potable water supply (a		
Differential pressure gauge used:	MidWest 845-5 (potable)	Serial Number: 09231317	7 Date Tested for Accuracy: 3/14/2024
	Doul	ble Check Valve	7
	Check Valve #1	Check Valve #2	
Initial Test Date: 6/27/2024 Time: 2:45 PM	Held at 2.3 PSID ✓ ClosedTight Leaked	Held at 2.1 PSID ClosedTight Leaked	
Repairs and Materials Used	i		
Repair Details			7
Test After Repa	irs Held at 0 PSID	Held at 0 PSID	
		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