pfluTexas Commission on Environmental Quality BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water supplier for recordkeeping *purposes:												es:	
NAME OF PWS:				Pflugerville Water									
PWS ID#:				2270014									
PWS MAILING ADDRESS:				100 E Main St Pflugerville, TX 78660									
PWS CONTACT PERSON:				Backflow Inspections									
ADDRESS OF SERVICE:				1708 Winding Talley Street Pflugerville TX 78660									
The backflow prevention assembly detailed below has been tested and maintained as required by commission regulations													
and is	certified to	be operating											
TYPE OF BACKFLOW PREVENTION AS													
Reduced Pressure Princip				, j	+ + +	Reduced Pressure Principle-Detector (RPBA-D) Type II							
Double Check Valve (DC				,		Double Check-Detector (DCVA-D) Type II							
Pressure Vacuum Breaker				(PVB)		Spill-Resistant Pressure Vacuum Breaker (SVB)							
Manufacturer: Main: Apollo			lo		Bypass:	Size:			Main: 1"	Byp	ass:		
Model Number:		Main: DC4	A	Bypas	s:	BPA Loca		cation:	Right front y	Right front yard 5 feet of meter			
Serial	Number:	Main 85368C Bypass:					BPA Serves:		Irrigation				
Reason for test: New Existing Replacement Old Model/Serial #													
Is the s	assembly i					urer recommendations and/or loca			Il codes? Xes No				
Is the assembly installed on a nor													
					ci supp	ny (auxiliary):		1			es 🛛 No		
TEST RESULT		Reduced Pressure Principle Assembly					Type II Assembly		PVB & SVB				
						ly (RPBA)					VB		
PASS 🛛		DCVA				D 1 CIVI			A * T 1 .		C1 1 1 1 1		
FAIL		1 st Check 2		2 nd Check	***	Relief Valve	Bypass Check		Air Inlet Cl		Check Valv	ve	
Initial Test		Held at 2.1 psid Held at 2.1 psid			Opened at					psid Held at			
Date:		Closed Tight 🛛 Closed Tight 🖾			psid					sid	-		
12/18/2024				Leaked		Did not	U		Did it fully open Leaked				
Time 10:10AM						open			$\operatorname{Yes}\left[\Box\right]/\operatorname{No}\left[\Box\right])$			1	
Repairs	Main:		1		J		I	<u> </u>					
Materia													
Used**		Bypass:											
<u>Test After</u> <u>Repair</u>		Held at psid Held at Closed Tight 🔲 Closed Tigh			psid	psi	Closed		Opened at	psid Held at psid			
					ht 🛛								
Date:						Tight 🗆							
Time:								ļ		ļ			
Diff	antial			umeric readi	ng req	uired for DCVA	0	<u> </u>					
		sure gauge used:			ONT	Potable:			Non-Potable:		/1 //202 /		
Make/	Model:	MidWest 8	45		SN:	09231317 Date tested for accuracy : 3/14/2024							
Remarks:													
Company Name: Safewater Backflow Licensed Tester Name Brad Weyant									ant				
Company Marne		Balewa	DACKIIOW		(Print/Type):								
Compa	any Addre	ss: PO Box 4002 Austin, TX 78765				Licensed Tester Name (Signature):							
I.	5												
Company Phone #: 512-0			605-9790			BPAT License # BP0016935							
T.	5		ž	License Expiration Date: 12/3/2027									
		·	7	The above is		ied to be true a							

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS [30 TAC §290.46(B)] ** USE ONLY MANUFACTURER'S REPLACEMENT PARTS