

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:

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:	20504 Haygrazer B 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 within acceptable parameters.

**TYPE OF BACKFLOW PREVENTION ASSEMBLY (BPA):**

<input type="checkbox"/>	Reduced Pressure Principle (RPBA)	<input type="checkbox"/>	Reduced Pressure Principle-Detector (RPBA-D) Type II	<input type="checkbox"/>
<input checked="" type="checkbox"/>	Double Check Valve (DCVA)	<input type="checkbox"/>	Double Check-Detector (DCVA-D) Type II	<input type="checkbox"/>
<input type="checkbox"/>	Pressure Vacuum Breaker (PVB)	<input type="checkbox"/>	Spill-Resistant Pressure Vacuum Breaker (SVB)	

Manufacturer:	Main: Apollo	Bypass:	Size:	Main: 1"	Bypass:
Model Number:	Main: DC4A	Bypass:	BPA Location:	Right front yard 5 feet from meter	
Serial Number:	Main 88870C	Bypass:	BPA Serves:	Irrigation	


Reason for test:	New <input checked="" type="checkbox"/>	Existing <input type="checkbox"/>	Replacement Old Model/Serial #	
Is the assembly installed in accordance with manufacturer recommendations and/or local codes?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is the assembly installed on a non-potable water supply (auxiliary)?				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>TEST RESULT</b>	Reduced Pressure Principle Assembly (RPBA)	Type II Assembly	PVB & SVB		
<b>PASS</b> <input checked="" type="checkbox"/>	DCVA	Relief Valve	Bypass Check	Air Inlet	Check Valve
<b>FAIL</b> <input type="checkbox"/>	1 <sup>st</sup> Check	2 <sup>nd</sup> Check***			
<b>Initial Test</b> Date: 7/3/2024 Time: 2:50PM	Held at 2.0 psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at 1.8 psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did not open <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did it fully open (Yes <input type="checkbox"/> /No <input type="checkbox"/> Leaked <input type="checkbox"/>
Repairs and Materials Used**	Main: _____ Bypass: _____				
<b>Test After Repair</b> Date: _____ Time: _____	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psi	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid Held at _____ psid

\*\*\* 2<sup>nd</sup> check: numeric reading required for DCVA only

Differential pressure gauge used:	Potable: <input checked="" type="checkbox"/>	Non-Potable: <input type="checkbox"/>
Make/Model:	MidWest 845	SN: 09231317
Date tested for accuracy :	3/14/2024	

Remarks:		

Company Name:	Safewater Backflow	Licensed Tester Name (Print/Type):	Brad Weyant
Company Address:	PO Box 4002 Austin, TX 78765	Licensed Tester Name (Signature):	
Company Phone #:	512-605-9790	BPAT License #	BP0016935
		License Expiration Date:	12/3/2024

**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