

Texas 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:	Resident
PWS ID#:	Resident
PWS MAILING ADDRESS:	2141 CR 280 Leander, TX 78641
PWS CONTACT PERSON:	Resident
ADDRESS OF SERVICE:	2141 CR 280 Leander, TX 78641

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 checked="" type="checkbox"/>	Reduced Pressure Principle (RPBA)	<input type="checkbox"/>	Reduced Pressure Principle-Detector (RPBA-D)	Type II <input type="checkbox"/>
<input 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: RP4A	Bypass:	BPA Location:	Right back corner of back yard along fence	
Serial Number:	Main 48554C	Bypass:	BPA Serves:	Irrigation with ossf	

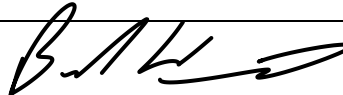
Reason for test:	New <input checked="" type="checkbox"/>	Existing <input type="checkbox"/>	Replacement Old Model/Serial #
Is the assembly installed in accordance with manufacturer recommendations and/or local codes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is the assembly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

TEST RESULT	Reduced Pressure Principle Assembly (RPBA)			Type II Assembly	PVB & SVB	
	DCVA		Relief Valve	Bypass Check	Air Inlet	Check Valve
	1st Check	2nd Check***				
<b>PASS</b> <input checked="" type="checkbox"/>  <b>FAIL</b> <input type="checkbox"/>						
<b>Initial Test</b> Date: 6/19/2024 Time: 3:30PM	Held at 7.8 psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at ___ psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at 3.4 psid Did not open <input type="checkbox"/>	Held at ____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _ psid Did not open <input type="checkbox"/> Did it fully open (Yes <input type="checkbox"/> /No <input type="checkbox"/> )	Held at ___ psid Leaked <input type="checkbox"/>
Repairs and Materials Used**	Main: Flushed debris 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 ____ psid	Held at ____ psid Closed Tight <input type="checkbox"/>	Opened at ____ psid	Held at ____ psid

\*\*\* 2nd 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