

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:	WTC PUA
PWS ID#:	2270235
PWS MAILING ADDRESS:	13215 Bee Cave Pkwy Building B Suite 110 Bee Cave, TX 77388
PWS CONTACT PERSON:	WTC PUA Backflows
ADDRESS OF SERVICE:	228 Old Stone Rd

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: APO110	Bypass:	Size:	Main: 1"	Bypass:
Model Number:	Main: DCVA	Bypass:	BPA Location:	12' Past Meter	
Serial Number:	Main: 52883C	Bypass:	BPA Serves:	Irrigation	


Reason for test:	New <input checked="" type="checkbox"/>	Existing <input type="checkbox"/>	Replacement <input type="checkbox"/>	Old Model/Serial # <input type="checkbox"/>
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
	1 <sup>st</sup> Check	2 <sup>nd</sup> Check***				
<input checked="" type="checkbox"/> PASS						
<input type="checkbox"/> FAIL						
<b>Initial Test</b> Date: 9/25/23 Time: 3:00 pm	Held at 1.7 psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at 1.9 psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did not open <input type="checkbox"/> 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: _____ 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

\*\*\* 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: Watts TK-99E	SN: 574997	Date tested for accuracy: 1/19/23

Remarks:	
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Company Name: H2Flow	Licensed Tester Name (Print/Type): Thomas Money
Company Address: 100 Antlers Trail Leander, TX 78641	Licensed Tester Name (Signature): 
Company Phone #: (512) 259-5296	BPAT License #: BPO016285
	License Expiration Date: 1/6/24

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