

§290.47(f) Appendix F. Sample Backflow Prevention Assembly Test and Maintenance Report.

Figure: 30 TAC §290.47(f)

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water supplier for record keeping purposes:

BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS: City of Valle Mills
 PWS I.D.: # _____
 MAILING ADDRESS: citysec@vmtx.us
 CONTACT PERSON: whitnev 254-791-0009 EXT 12252
 LOCATION OF SERVICE: Cefco 67 702 W ave C

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 ASSEMBLY	
<input checked="" type="checkbox"/> Reduced Pressure Principle	<input type="checkbox"/> Reduced Pressure Principle-Detector
<input type="checkbox"/> Double Check Valve	<input type="checkbox"/> Double Check-Detector
<input type="checkbox"/> Pressure Vacuum Breaker	<input type="checkbox"/> Spill-Resistant Pressure Vacuum Breaker

Manufacturer watts Size 1/2"
 Model Number 009 O1 Located At in store room
 Serial Number 368965

Is the assembly installed in accordance with manufacturer recommendations and/or local codes? yes

	Reduced Pressure Principle Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>5.6</u> psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at <u>2.4</u> psid Did not open <input type="checkbox"/>	Opened at _____ psid Did not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Test gauge used: Make/Model Conbraco 40200TKP SN: 372397 Calibration Date: 09 / 21 / 16
 Remarks: _____


The above is certified to be true at the time of testing.

Firm Name Bsure Bacflow Certified Tester Benny Hickson
 Firm Address 505 Dusty Trail Belton, Tx Cert. Tester No. BP0001473 Date 4 / 10 / 17
 Firm Phone # 254-493-8403

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS
 ** USE ONLY MANUFACTURER'S REPLACEMENT PARTS

BENNY MAC HICKSON
MASTER
MED GAS-17; RMP

LICENSE NO.
23079



D.O.B.

EXPIRES
09/30/2017

IS HEREBY LICENSED IN ACCORDANCE WITH CHAPTER 1301 OCC. CODE

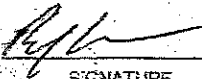

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

BENNY M HICKSON

Is hereby licensed as a

BACKFLOW PREVENTION ASSEMBLY TESTER

License Number Expires
BP0001473 **10/23/2017**

SIGNATURE EXECUTIVE DIRECTOR



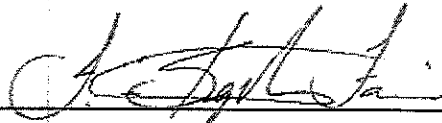
HARDIN &
ASSOCIATES
CONSULTING, LLC

TEST KIT CALIBRATION CERTIFICATE

THIS IS TO CERTIFY THAT THE CALIBRATION OF THE TEST KIT LISTED BELOW MEETS OR EXCEEDS THE STATED STANDARDS OF ACCURACY.

TEST KIT MODEL:	CONBRACO 40-200-TK
TEST KIT S/N:	372397
RANGE:	0 – 12 PSID
GAUGE ACCURACY:	+/- 0.2 PSID DESCENDING Pass/Fail PASS
DATE CERTIFIED:	09/21/2016
CERTIFICATION EXPIRES:	09/21/2017

TESTED BY:



ALL TEST INSTRUMENTS USED IN THE CALIBRATION OF THIS TEST KIT CONFORM TO ASME B40.1 AND ARE TRACEABLE TO N.I.S.T. ID# 70692

AGENT: J. STEPHEN FAIN

COMPANY: HARDIN & ASSOCIATES CONSULTING, LLC

ADDRESS: 5005 W. ROYAL LANE, SUITE 170

CITY, STATE ZIP: IRVING, TEXAS 75063

PHONE: 972-823-8800

FAX: 972-823-8802

CELL: 214-850-1532

NOTES: