## **Backflow Assembly Test Report**

Water Utility Na	ıme:					
Owner of Assem	nbly:		Phone N	0.:		
Address of Assembly:			City:	State:	Zip:	
Location of Asse	embly:		Protecting:			
Serial No.:			Size of Assembly: Model No.:			
lame of Assem	bly Manufact	turer:				
□Existing □I	New □Re	· · · —	) □Ren	(Explain on back of repor	Line Pressure:	
			INITIAL TEST		I	
Check Valve #1		Check Valve #2	Differential Pressure Relief Valve	Pressure Vacuum Breaker	Spill-Resistant Vacuum Breaker	
Reduced Pressure Assembly	PSI Across	☐ Leaked ☐ Closed Tight	Opened atpsi ☐ Opened under 2 psi	Air Inlet Opened at:psi ☐ Fully Open	Air Inlet Open at: psi □ Fully Open	
Double Check	Check valve held at	Check Valve held at	or did not open	Check Valve held at	Check Valve held at	
Assembly	psi	psi		psi	psi	
	_		REPAIRS			
☐ Cleaned (explain): ☐Repair/Replace (explain):		☐ Cleaned (explain): ☐Repair/Replace (explain):				
PSI Across_		PSI Across	Opened at			
☐ Closed Tig		☐ Closed Tight	Reduced Pressure			
echnician Name PRINT:			Certification No.: Phone No.:		No.:	
itial Test By SIGN:				Date: Time:		
Repaired By SIG			Date:			
inal Test By SIG			Date:	T c-::		
nis assembly's INITIAL TEST performance was: nis assembly's FINAL TEST performance was:				□ Fail □ Fail		
Y:			Assembly Owner Representative PRINT:			

I certify the above test has been performed, I am aware of the final performance, and I agree to pay the technician.

Distribution: Assembly Owner, Tester, and Water Utility

Comments: