



PWS# 0430009

Permit # \_\_\_\_\_ - \_\_\_\_\_

BACKFLOW PREVENTION ASSEMBLY TEST REPORT

NEW  EXISTING  REPLACED  (OLD SERIAL #) \_\_\_\_\_

**Assembly Location**

Facility Name \_\_\_\_\_ Phone \_\_\_\_\_

Service Address \_\_\_\_\_ Zip \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

**Contact Information**

Mailing Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

THE BACKFLOW ASSEMBLY DETAILED BELOW HAS BEEN TESTED AND MAINTAINED AS REQUIRED BY TCEQ REGULATIONS AND IS CERTIFIED TO BE OPERATING WITHIN ACCEPTABLE PARAMETERS.

Is the assembly installed in accordance with manufacturer recommendations and/ or local codes? \_\_\_\_\_ (Yes/No)

**Assembly Information**

RP  DC  PVB  SVB  RPDA  DCDA  OTHER

Size: \_\_\_\_\_ Mfg : \_\_\_\_\_ Model: \_\_\_\_\_ Serial #: \_\_\_\_\_

Device Location \_\_\_\_\_

Hazard Description \_\_\_\_\_

Test Date	Reduced Pressure Principle Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve Opened at _____psid  Did not open <input type="checkbox"/>	Air Inlet	Check Valve
_____	#1 Check Held at _____ Closed tight <input type="checkbox"/> Leaked <input type="checkbox"/>	#2 Check Held at _____ Closed tight <input type="checkbox"/> Leaked <input type="checkbox"/>			Opened At _____psid  Did not open <input type="checkbox"/>
Initial Test					
Repair Materials Used	<p style="text-align: center;">USE ONLY MANUFACTURER'S REPLACEMENT PARTS</p>				
Final Test	Held at _____ Closed tight <input type="checkbox"/>	Held at _____ Closed tight <input type="checkbox"/>	Opened at _____psid	Opened at _____psid	Held at _____psid
Remarks	<p>_____</p> <p>_____</p>				

\*\*\*Test records must be kept for 3 Years\*\*\*

**Test Gauge**

Manufacturer \_\_\_\_\_ SN \_\_\_\_\_ Date tested for accuracy \_\_\_\_\_

**Tester**

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

Tester Name \_\_\_\_\_ Certified BPAT Tester Number \_\_\_\_\_

Company Name \_\_\_\_\_ Company Address \_\_\_\_\_

Signature \_\_\_\_\_ Phone # \_\_\_\_\_ Date \_\_\_\_\_

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