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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PWS ID |  | | | Water System Name | | | |  | | | | | | | | | | | File # | |  | | | | |
| **Facility Name** | |  | | | | | | | | | | | | | | | | **Non-Residential  Residential** | | | | | | | |
| **Service Address** | | | |  | | | | | | | | | **City** | |  | | | | | | **Zip** | |  | | |
| **Contact Person** | | | |  | | | | | **Phone** | | |  | | | | | **Email** | | |  | | | | | |
| **Hazard Type (if known)** | | | | |  | | | | | | | **DCVA**  **RPBA  PVBA  AG Other** | | | | | | | | | | | | |  |
| **Preventer Physical Location** | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **New  Existing  Replacement: Old Ser. #** | | | | | | | | | |  | | | | | | **Confined Space Yes  No** | | | | | | | | | |
| **Assembly Make** | | |  | | | | **Model** | | | |  | | | **Serial #** | | | | | | | | | | **Size ”** | |
| **USC-Approved** | | | **Yes  No** | | | | **Proper Install** | | | | **Yes  No** | | | | | **Proper Orientation** | | | | | | **Yes  No** | | | |

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| **Initial Test**  **Passed**  **Failed** | | DCVA | | | | | | RPBA | | | | | | | | **PVBA/SVBA** | | | | | |
| Check Valve 1Leaked  psid **Check Valve 2** Leaked  psid | | | | | | **Relief Valve**  Opened psid/ Not Open  **Check Valve 2**  Closed Tight  Leaked Check Valve 1 psid **Approved Air Gap** Yes No | | | | | | | | **Air Inlet Valve**  Opened at psid  Did Not Open  Opened Fully Yes  No  **Check Valve** psid  Leaked | | | | | |
| **Cleaning, Repairs, & Parts** | | **Cleaned  Repaired** | | | | | | **Cleaned  Repaired** | | | | | | | | **Cleaned  Repaired** | | | | | |
| Disc | | | O-Ring(s) | | | Disc | | | O-Ring(s) | | | | | Air Inlet Disc | | Float | | | |
| Spring | | | Module | | | Spring | | | Module | | | | | Air Inlet Spring | | Diaphragm | | | |
| Guide | | | Rubber Kit | | | Diaphragm | | | Rubber Kit/Guide | | | | | Check Disc | | Rubber Kit | | | |
| Seat | | |  | | | Seat | | |  | | | | | Check Spring | |  | | | |
| **Final Test**  **Passed**  **Failed** | | Check Valve 1Leaked  psid **Check Valve 2**  Leaked  psid | | | | | | **Relief Valve**  Opened at psid  **Check Valve 2** Closed Tight Check Valve 1 psid | | | | | | | | **Air Inlet Valve**  Opened at psid  Opened Fully Yes  No  **Check Valve** psid | | | | | |
| **Air Gap Inspection** Pass  Fail | | | | | | | | **Supply Pipe Diameter** | | | | | |  | **”** | **Air Gap Separation** | | | |  | **”** |
| **Line Pressure** | | |  | psi | | | **Detector Meter** | |  | | | Gals CuFt | | | | **Service Restored** Yes  No | | | | | |
| **Remarks\*** |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | |
| **Test Kit Make & Model** | | | | | |  | | | | **Serial #** | | |  | | | | **Ver./Cal Date\*\*** | |  | | |

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| **By this signature, I certify:** | 1. **I personally inspected and field-tested the backflow assembly using field test procedures meeting WAC 246-290-490 and test equipment meeting WAC 246-292-034; or I personally inspected the air gap or AVB.** 2. **The information in this report is true, complete, and accurate.** | | | | | | | | | | | | |
| **BAT Signature (initial test)** | | |  | | **Cert. #** | | |  | | | **Date/Time** | |  |
| **BAT Name (print)** | | |  | | **BAT Phone #** | | | |  | | | | |
| **Repaired By** | | |  | | | | | | | | **Date/Time** |  | |
| **BAT Signature (after repair)** | | | |  | **Cert. #** | |  | | | | **Date/Time** |  | |
| **BAT Name (print)** | |  | | | **BAT Phone #** | | | | |  | | | |
| **BAT Company Name** | |  | | | **Address** |  | | | | | | | |