

CITY OF BURTON

4093 Manor Dr.

Burton, mi 48519

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Backflow Prevention Assembly

Test Report

Mailing Address

Size: 0.000

Burton, MI

Account #:

Service Address

Reduced Pressure Principle Assembly				RP <input type="checkbox"/>	DCDA <input type="checkbox"/>	
Double Check Valve Assembly				DC <input type="checkbox"/>	RPDA <input type="checkbox"/>	
Check Valve #1		Check Valve #2		Relief Valve	PVB/SVB	
Initial Test	Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>	Did not Open <input type="checkbox"/>	AIR INLET		
	Closed Tight <input type="checkbox"/>	Closed Tight <input type="checkbox"/>	Opened at _____ PSID	Did not Open <input type="checkbox"/>		
Repairs	Held at _____ PSID	Held at _____ PSID		Opened at _____ PSID		
	Cleaned <input type="checkbox"/>	Cleaned <input type="checkbox"/>	Cleaned <input type="checkbox"/>	CHECK VALVE		
Details	Replaced <input type="checkbox"/>	Replaced <input type="checkbox"/>	Replaced <input type="checkbox"/>	Leaked <input type="checkbox"/>		
				Held at _____ PSID		
Final Test				Cleaned <input type="checkbox"/>		
	Closed Tight <input type="checkbox"/>	Closed Tight <input type="checkbox"/>	Opened at _____ PSID	Replaced <input type="checkbox"/>		
Comments				AIR INLET		
The above report is certified to be true.				Opened at _____ PSID		
				CHECK VALVE		
				Held at _____ PSID		
				Line Pressure _____		
				Meter Reading _____		
				Held Backpressure _____		
				#2 Shutoff _____		
				Relief Valve Exercised _____		
Date/Time	Tester	Signature	Tester #	Test Kit	Passed	Failed
Initial Test					<input type="checkbox"/>	<input type="checkbox"/>
Repairs					<input type="checkbox"/>	<input type="checkbox"/>
Final Test					<input type="checkbox"/>	<input type="checkbox"/>