

Appendix E

Assembly Test Report Form

Backflow Assembly Test Report

Water System Name: _____ File No.: _____

Location of Assembly: _____

Owner of Assembly: _____

Address: _____ City: _____ State: _____ Zip _____

Size of Assembly: _____ Model No.: _____ Serial No.: _____

Name of Assembly Manufacturer: _____

	Check Valve #1	Check Valve #2	Differential Pressure Relief Valve	Pressure Vacuum Breaker	
I N T I A L	RP	PSI Across _____	PSI Across _____	Opened at ____ # Opened Under 2# or did not open	AIR INLET: Opened at ____ # Opened Under 1# or did not open
	DC	Closed Tight Leaked	Closed Tight Leaked		CHECK VALVE: Closed Tight Leaked
R E P A I R S	Cleaned Replaced: Disc Spring Guide Pin Feather Hingepin Seat Diaphragm Other (describe)	Cleaned Replaced: Disc Spring Guide Pin Feather Hingepin Seat Diaphragm Other (describe)	Cleaned Replaced: Disc Spring Diaphragm Seat(s) O-ring(s) Module Other (describe)	Cleaned Replaced: Air Inlet Disc Air Inlet Spring Check Disc Check Spring Other (describe)	
FINAL TEST	PSI Across Closed Tight	PSI Across Closed Tight	Opened at ____ # Reduced Pressure	Satisfactory	

Initial Test By: _____ Certification No. _____ Date: _____

Repaired By: _____ Date: _____

Final Test By: _____ Certification No. _____ Date: _____

This assembly's INITIAL TEST performance was: Satisfactory Unsatisfactory

This assembly's FINAL TEST performance was: Satisfactory Unsatisfactory

I certify the above test has been performed and I am aware of the final performance.

BY: _____ Assembly Owner Representative

Distribution: White - Assembly Owner Pink - Tester Canary - Water Utility