BACKFLOW PREVENTION DEVICE FIELD TESTING AND MAINTENANCE REPORT

RETURN NO LATER THAN:

MANUFACTURER: 1		TYP	E:	MODEL: SIZE:		<u> </u>	SERIAL NUMBER:		
LOCATIO	ON:							CUSTOMER NAME:	
	CHECK VALVE #1		CHECK VALVE #2 DIFFERENTIA PRESSURE REL VALVE		AIR INLET VALVE		COMMENTS:		
INI- TIAL TEST	CLOSE AT LEAKED	PSID	CLOSE ATPSII LEAKED CLOSED TIGHT		OPEN ATOPEN UNDEF OR DID NOT		IF DEVICE REPLACED, WHY?		
R E P AI R S	CLEANED REPLACED: DISC DISC HOLDER SPRING GUIDE HINGE PIN SEAT O-RINGS MODULE OTHER DESCRIBE:		CLEANED REPLACED: DISC DISC HOLDER SPRING GUIDE HINGE PIN SEAT O-RINGS MODULE OTHER DESCRIBE:	REPLACED: DISC(S) DISC HOLDER SPRING DIAPHRAGM(S) SEAT O-RINGS MODULE OTHER	CLEANE REPLACED: DISC DISC HOLDE SPRING CANOPY DIAPHRAGE O-RINGS OTHER DESCRIBE:	ER			
					SHUTOFF #1 SHUTOFF #2		TESTING COMPA	PAGE GRID	
FINAL TEST	CLOSE AT	PSID CLOSE ATPSID OPEN ATPSID OPEN ATPSII				_ PSID		NY PHONE NUMBER	
THE ABOVE REPORT IS CERTIFIED TO BE TRUE: Test Notices can be emailed of to: backflow@elsegundo.org INITIAL TEST BY (SIGNATURE) (PRINT NAME) TESTER#									
REPAIRED BY (SIGNATURE) (PRINT NAME)									
FINAL TEST BY (SIGNATURE) (PRINT NAME)							TESTER#	DATE WORK PERFORMED	
MAIL TO	CITY OF EL WATER DIV 400 LOMIT EL SEGUNE	/ISIO A ST	N			[SITE CONTACT		
FROM:							SITE CONTACT PH	HONE NUMBER	