



**Backflow Prevention Assembly  
 Test Report**

**Mailing Address**

**Account #:**  
**Test Due:**  
**Meter #:**

**Service Address**

**Serial #:**  
**Manufacturer:**  
**Model:**  
**Type:**  
**Size:**

	Reduced Pressure Principle Assembly			RP	DCDA
	Double Check Valve Assembly			DC	RPDA
	Check Valve #1	Check Valve #2	Relief Valve	PVB	Air Gap
<b>Initial Test</b>	Leaked ( )	Leaked ( )		SVB	AVB
	Closed Tight ( )	Closed Tight ( )	Did not Open ( )	<b>PV/SVB</b>	
	Held at ____ PSID	Held at ____ PSID	Opened at ____ PSID	<b>AIR INLET</b> Did not Open ( )	
<b>Repairs</b>	Cleaned ( )	Cleaned ( )	Cleaned ( )	Opened at ____ PSID	
	Replaced ( )	Replaced ( )	Replaced ( )	<b>CHECK VALVE</b> Leaked ( ) Held at ____ PSID	
				Cleaned ( ) Replaced ( )	
<b>Final Test</b>	Closed Tight ( )	Closed Tight ( )		<b>AIR INLET</b> Opened at ____ PSID	
	Held at ____ PSID	Held at ____ PSID	Opened at ____ PSID	<b>CHECK VALVE</b> Held at ____ PSID	

Comments	Line Pressure _____
	Meter Reading _____
	Held Backpressure _____
	#2 Shutoff _____

**The above report is certified to be true.**

Relief Valve Exercised \_\_\_\_\_

	Date/Time	Tester	Signature	Tester#	Test Kit	Passed	Failed
<b>Initial Test</b>						<input type="checkbox"/>	<input type="checkbox"/>
<b>Repairs</b>						<input type="checkbox"/>	<input type="checkbox"/>
<b>Final Test</b>						<input type="checkbox"/>	<input type="checkbox"/>