

City of Napoleon

BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: P-314 Co. Rd. 12

ZIP: 43545

Business Name: T.M.T. Warehouse

Phone# 592-1041

DEVICE INFORMATION

Type (circle one) RP DC VB RPDA DCDA

Manf/Model: WAHS 009-M-3 Size: 3/4" Serial No. 73539

Location of Device: W. mech Room

Type of Test: Differential Gauge Sight Tube Potable

Outlet valve holding RP <input type="checkbox"/> DC <input type="checkbox"/> failed RP <input type="checkbox"/> DC <input type="checkbox"/>	Reduced Pressure Assembly ↓ Double Check Valve ↓		Relief Valve ↓	Pressure Vacuum Breaker	
	1st Check	2nd Check		Air Inlet	Check Valve
	Test Results <i>Fail</i>	DC <u>10.6</u> psi RP <u>10.6</u> psi		DC _____ psi <u>4.2</u>	opened at <u>1.2</u> psi did not open <input type="checkbox"/>
Date: <u>3-18-02</u>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>
Repairs & Materials	Note: #2 shutoff not holding				
<u>Installed new Device</u>				Serial # <u>79695</u> <u>009-m3 QT</u>	
Test After Repairs <i>Pass</i>	DC _____ psi RP <u>8.2</u> psi	DC _____ psi RP <u>7.2</u> psi	opened at <u>2.8</u> psi did not open <input type="checkbox"/>	opened at _____ psi did not open <input type="checkbox"/>	held at _____ psi leaked <input type="checkbox"/>
Date: <u>5-20-02</u>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>

Tester Signature: Cham Shong Certification No. 2939

Owner/Representative Signature: [Signature]

No. 2 valve held
 ↓
 Shutoff

Date - 3-18-02

City of Napoleon

BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: P-311 Co. Rd. 12 ZIP: 43545
 Business Name: T.M.T. Warehouse

DEVICE INFORMATION

Type (circle one) RP DC VB RPDA DCDA

Manf/Model: Watts 007M1 Size: 3/4" Serial No. 50285
 Location of Device: West mech room
 Type of Test: Differential Gauge Sight Tube

Outlet valve holding RP <input type="checkbox"/> DC <input checked="" type="checkbox"/> failed RP <input type="checkbox"/> DC <input type="checkbox"/>	Reduced Pressure Assembly ↓		Relief Valve ↓	Pressure Vacuum Breaker	
	Double Check Valve ↓			Air Inlet	Check Valve
	1st Check	2nd Check			
Test Results Pass	DC <u>2.6</u> psi	DC <u>2.3</u> psi	opened at _____ psi	opened at _____ psi	held at _____ psi
	RP _____ psi		did not open <input type="checkbox"/>	did not open <input type="checkbox"/>	leaked <input type="checkbox"/>
Date: <u>3-18-02</u>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>
Repairs & Materials					
Test After Repairs	DC _____ psi	DC _____ psi	opened at _____ psi	opened at _____ psi	held at _____ psi
	RP _____ psi	RP _____ psi	did not open <input type="checkbox"/>	did not open <input type="checkbox"/>	leaked <input type="checkbox"/>
Date:	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>

Tester Signature: Shaun Shora Certification No. 2939
 Owner/Representative Signature: [Signature]

2 shut off held

Date - 3-18-02

City of Napoleon

BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: P-311 Co. Rd. 12 ZIP: 43515
 Business Name: T.M.T. Warehouse

DEVICE INFORMATION

Type (circle one) RP DC VB RPDA **DCDA**

Manf/Model: Ames 3000 SS Size: 6" Serial No. 114287-0701

Location of Device: W. mech Room

Type of Test: Differential Gauge Sight Tube

Outlet valve holding RP <input type="checkbox"/> DC <input checked="" type="checkbox"/> failed RP <input type="checkbox"/> DC <input type="checkbox"/>	Reduced Pressure Assembly ↓			Pressure Vacuum Breaker	
	Double Check Valve ↓		Relief Valve ↓	Air Inlet	Check Valve
	1st Check	2nd Check			
Test Results <i>Fail</i>	DC <u>0</u> psi RP _____ psi	DC <u>0</u> psi	opened at _____ psi did not open <input type="checkbox"/>	opened at _____ psi did not open <input type="checkbox"/>	held at _____ psi leaked <input type="checkbox"/>
Date: <u>3-18-02</u>	Pass <input type="checkbox"/> Failed <input checked="" type="checkbox"/>	Pass <input type="checkbox"/> Failed <input checked="" type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>
Repairs & Materials	<i>check was lodged open w/no debris</i>		<i>cleaned check</i>		
Test After Repairs <i>Pass</i>	DC <u>1.2</u> psi RP _____ psi	DC <u>1.9</u> psi RP _____ psi	opened at _____ psi did not open <input type="checkbox"/>	opened at _____ psi did not open <input type="checkbox"/>	held at _____ psi leaked <input type="checkbox"/>
Date: <u>3-18-02</u>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>

Tester Signature: Shawn Thoma Certification No. 2939
 Owner/Representative Signature: [Signature]