

City of Napoleon

BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: 1108 Scott Zip: 43545
 Business Name: Pioneer Quick Lube
 Contact Person: Denny Tonjes Title: Area Super
 Phone Number: 599-2800 Date of Test: 3-1-00

DEVICE INFORMATION

Type (circle one) RP DC VB RPDA DCDA
 Manf/Model: Watts 909 mod Size: 3/4" Serial No.: 412396
 Location of Device: N.E. Corner basement
 Type of Test: Differential Gauge Sight Tube

Outlet Valve	Reduced Pressure Assembly			Pressure Vacuum Breaker	
	Double Check Valve		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Holding <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	DC _____ psi	DC _____ psi	Opened at _____ psi	Opened at _____ psi	Held at _____ psi
	<u>Apparent</u> RP 7.6 psi		Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Leaked <input type="checkbox"/>
	<u>Actual</u> RP 7.6 psi		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"/>
Date: <u>3-1-00</u>					
Repairs & Materials	<u>Cleaned Check #1</u>				
Test After Repairs <u>Pass</u>	DC _____ psi	DC _____ psi	Opened At <u>4.8</u> psi	Opened At _____ psi	Held At _____ psi
	RP <u>7.6</u> psi	RP <u>6.8</u> psi	Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Leaked <input type="checkbox"/>
Date: <u>3-1-00</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"/>

Note: mounting brackets on device need to be moved, to allow operation of shut-off valves
 Tester Signature: Douglas D. Seushke Certification No. 2539
 Owner/Representative Signature: Denny Tonjes