

City of Napoleon

BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: 1413 N. Scott Zip: 43545
 Business Name: Huston Cleaners
 Contact Person: Jim Huston Title: Owner
 Phone Number: 592-2941 Date of Test: 12-28-98

DEVICE INFORMATION

Type (circle one) **RP** DC VB RPDA DCDA
 Manf/Model: Watts 009 Size: 1" Serial No.: 74078
 Location of Device: behind Compressor near Water Heater
 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"/>					
Test Results	DC _____ psi	DC <u>7.8</u> psi	Opened at <u>2.8</u> psi	Opened at _____ psi	Held at _____ psi
	Apparent RP _____ psi		Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Leaked <input type="checkbox"/>
Date: <u>12-28-98</u>	Actual RP <u>8.4</u> psi		Open <input type="checkbox"/>	Open <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"/>	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: Brian Tyle Certification No. 611
 Owner/Representative Signature: Jim Huston