

# City of Napoleon

## BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: 1805 N. SCOTT ST ZIP: 43545  
 Business Name: MC DONALDS

### DEVICE INFORMATION

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

Manf/Model: WILKINS ZURN 975XL Size: 2" Serial No. 1307625  
 Location of Device: Storage Room Meter SETTING  
 Type of Test: Differential Gauge  Sight Tube

Outlet valve holding RP <input type="checkbox"/> DC <input type="checkbox"/> failed RP <input type="checkbox"/> DC <input type="checkbox"/>	Reduced Pressure Assembly <input checked="" type="checkbox"/> ↓		Relief Valve ↓	Pressure Vacuum Breaker	
	Double Check Valve ↓			Air Inlet	Check Valve
	1st Check	2nd Check			
Test Results	DC <u>10.3</u> psi RP _____ psi	DC <u>8.8</u> psi	opened at <u>5.8</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>11/27/01</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					
Test After Repairs	DC _____ psi RP _____ psi	DC _____ 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:	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: Daniel R. Brown Certification No. 528  
 Owner/Representative Signature: Debra Johnson