

# City of Napoleon

## BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: 2250 N. Scott St. ZIP: 43545  
 Business Name: Amvets Post 1313

### DEVICE INFORMATION

Type (circle one)    RP                      DC                      VB                      RPDA                      DCDA

Manf/Model: AMES 3000SS    Size: 4"    Serial No. 38M1152  
 Location of Device: MECH RM  
 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 <u>Pass</u>	DC <u>3.6</u> psi RP _____ psi	DC <u>3.5</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>5-7-02</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 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: Douglas L Smith    Certification No. 2539  
 Owner/Representative Signature: [Signature]