

City of Napoleon

BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: 1000 Westmoreland Zip: 43545

Business Name: German mutual

Contact Person: Rupert Krape Title: President

Phone Number: 599-3993 Date of Test: 2-3-00

DEVICE INFORMATION

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

Manf/Model: Watts 009 ml QT Size: 2" Serial No.: 94961

Location of Device: Boiler Room East Wall

Type of Test: Differential Gauge Sight Tube

Outlet Valve	Reduced Pressure Assembly		Pressure Vacuum Breaker		
	Double Check Valve		Relief Valve	Air Inlet	Check Valve
Holding <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	1st Check	2nd Check			
Test Results: <u>Pass</u> Date: <u>2-3-00</u>	DC _____ psi <u>Apparent</u> RP <u>8.2</u> psi <u>Actual</u> RP <u>7</u> psi	DC _____ psi	Opened at <u>2.2</u> psi Did Not Open <input type="checkbox"/>	Opened at _____ psi Did Not Open <input type="checkbox"/>	Held at _____ psi Leaked <input type="checkbox"/>
	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 Date:	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"/>
	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: Robert Nelson Certification No. 3016

Owner/Representative Signature: [Signature]