

# City of Napoleon

## BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: 700 Westmoreland Zip: 43545  
 Business Name: School Bus Garage  
 Contact Person: Joe Dietrick Title: Bus Supervisor  
 Phone Number: 592-2403 Date of Test: 2-18-00

### DEVICE INFORMATION

Type (circle one)      RP      **DC**      VB      RPDA      DCDA  
 Manf/Model: Wilkins 950 XL      Size: 2"      Serial No.: 438214  
 Location of Device: East wall of storage room  
 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 <i>PASS</i>	DC <u>10</u> psi	DC <u>10</u> psi	Opened at _____ psi	Opened at _____ psi	Held at _____ psi
	<b>Apparent</b> RP _____ psi.		Did Not Open <input type="checkbox"/>	Did Not Open <input type="checkbox"/>	Leaked <input type="checkbox"/>
Date: <i>2-18-00</i>	<b>Actual</b> RP _____ psi		Pass <input type="checkbox"/>	Pass <input type="checkbox"/>	Pass <input type="checkbox"/>
	Pass <input checked="" type="checkbox"/>	Pass <input checked="" type="checkbox"/>	Failed <input type="checkbox"/>	Failed <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"/>	Pass <input type="checkbox"/>	Pass <input type="checkbox"/>	Pass <input type="checkbox"/>	Pass <input type="checkbox"/>
	Failed <input type="checkbox"/>	Failed <input type="checkbox"/>	Failed <input type="checkbox"/>	Failed <input type="checkbox"/>	Failed <input type="checkbox"/>

Tester Signature: *Daniel L. ...* Certification No. 528  
 Owner/Representative Signature: *Brenda ...*