

# City of Napoleon

## BACKFLOW PREVENTION ASSEMBLY TEST RESULTS

Property Address: First Federal Bank ZIP: 93545  
 Business Name: 1333 Woodlawn Ave

### DEVICE INFORMATION

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

Manf/Model: White 007M3 QT    Size: 3/4"    Serial No. 103951

Location of Device: Mech. Room East Wall

Type of Test:    Differential Gauge     Sight Tube

Outlet valve holding <b>RP</b> <input checked="" type="checkbox"/> <b>DC</b> <input checked="" type="checkbox"/> failed <b>RP</b> <input type="checkbox"/> <b>DC</b> <input type="checkbox"/>	Reduced Pressure Assembly ↓			Pressure Vacuum Breaker	
	Double Check Valve ↓		Relief Valve ↓	Air Inlet	Check Valve
	1st Check	2nd Check			
Test Results	DC- <u>0</u> -psi RP _____ psi	DC <u>1.2</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:	Pass <input type="checkbox"/> Failed <input checked="" 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	<u>Cleaned Rubber Seat + Check</u>				
Test After Repairs	DC <u>1.0</u> 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 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"/>	Pass <input type="checkbox"/> Failed <input type="checkbox"/>

Tester Signature: Nathan Duke    Certification No. 602  
 Owner/Representative Signature: \_\_\_\_\_