**Greater Augusta Utility District**

**NEWWA Backflow Prevention Device Assembly Test Report Form**

Owner of Property Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address Tested by:

Certificate #:

(City,Town) (Zip)

Contact Person RPZ  DCVA PVB SRVB 

Make \_\_\_\_\_\_\_\_\_\_\_\_ Model No. \_\_\_\_\_\_\_\_\_\_\_\_

Device Address and Location Size Serial No. \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Test After Installation 

Device Identification Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Test After Repairs 

Annual Test 

Test Kit Serial # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Calibration Date\_\_\_\_\_\_\_\_\_\_\_\_\_ Semi-Annual 

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Reduced Pressure Backflow Prevention Device Assembly (RPZ)*** | | | | | | | | | | ***Pressure Vacuum Breaker (PVB)***  ***Spill Resistant Vacuum Breaker (SRVB)*** | |
| **Check Valve**  **No. 1** | | **Check Valve**  **No. 2 Tightness** | | | **Flow Condition Evaluated** | | **Relief Valve DP Opening Point** | | **Check Valve**  **No. 2 DP** | **Check Valve DP** | **Flow Condition Evaluated** |
| Closed Tight   Leaked  | | Closed Tight   Leaked  | | | Flow   No-Flow  | | Opened at PSID  \_\_\_\_\_\_\_\_\_\_.\_\_\_  Did Not Open  | | \_\_\_\_\_\_\_\_.\_\_\_  PSID | \_\_\_\_\_\_\_\_.\_\_\_  PSID | Flow   No-Flow  |
| **\_\_\_\_\_\_\_\_\_\_\_.\_\_**  PSID | |
| ***Double Check Valve Device Assembly (DCVA)*** | | | | | | | | | | **Air Inlet Valve DP Opening Point** | |
| **Backpressure Test** | | | **Check Valve No. 1**  **DP** | | | **Check Valve No. 2 DP** | | **Flow Condition Evaluated** | | Opened at \_\_\_\_\_\_\_\_\_.\_\_\_\_\_\_  PSID  Did Not Open  | |
| TC#1 PSI | TC#4 PSI | | \_\_\_\_\_\_\_.\_\_\_\_  PSID | | | \_\_\_\_\_\_\_\_\_.\_\_\_\_\_  PSID | | Flow   No-Flow  | |
| At the time of the test, the downstream shut-off valve was: Closed Tight Leaked  Not Tested  | | | | | | | | | | | |
| Line Pressure \_\_\_\_\_\_\_\_\_\_\_PSI | | | | Protection Type: Service Line @ Meter  Fire Service Line  | | | | | | | |

|  |  |
| --- | --- |
| Signature of Certified Tester | **PASS** **FAIL** **OTHER**  |
| Test Witnessed by:  Water Works Official  Owner Agent  Original to Greater Augusta Utility District  Brandon Main at [bmain@gaud.ws](mailto:bmain@gaud.ws) | Remarks  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Service Restored  |