

Greater Augusta Utility District

NEWWA Backflow Prevention Device Assembly Test Report Form

Owner of Property _____

Mailing Address _____

(City,Town)

(Zip)

Contact Person _____

Device Address and Location _____

Device Identification Number _____

Test Kit Serial # _____ Calibration Date _____

Date _____ Time _____

Tested by: _____

Certificate #: _____

RPZ ☐ DCVA ☐ PVB ☐ SRVB ☐

Make _____ Model No. _____

Size _____ Serial No. _____

Test After Installation ☐

Test After Repairs ☐

Annual Test ☐

Semi-Annual ☐

| <i>Reduced Pressure Backflow Prevention Device Assembly (RPZ)</i> | | | | | <i>Pressure Vacuum Breaker (PVB) Spill Resistant Vacuum Breaker (SRVB)</i> | |
|---|---|---|--|---|--|---|
| 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 <input type="checkbox"/> Leaked <input type="checkbox"/> _____ PSID | Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/> _____ | Flow <input type="checkbox"/> No-Flow <input type="checkbox"/> | Opened at PSID _____ Did Not Open <input type="checkbox"/> | _____ PSID | _____ PSID | Flow <input type="checkbox"/> No-Flow <input type="checkbox"/> |
| <i>Double Check Valve Device Assembly (DCVA)</i> | | | | | <i>Air Inlet Valve DP Opening Point</i> | |
| Backpressure Test | | Check Valve No. 1 DP | Check Valve No. 2 DP | Flow Condition Evaluated | | Opened at _____ PSID Did Not Open <input type="checkbox"/> |
| TC#1 PSI | TC#4 PSI | _____ PSID | _____ PSID | Flow <input type="checkbox"/> No-Flow <input type="checkbox"/> | | |
| At the time of the test, the downstream shut-off valve was: Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/> Not Tested <input type="checkbox"/> | | | | | | |
| Line Pressure _____ PSI | | Protection Type: Service Line @ Meter <input type="checkbox"/> Fire Service Line <input type="checkbox"/> | | | | |

Signature of Certified Tester _____

Test Witnessed by: _____

Water Works Official _____

Owner Agent _____

Original to Greater Augusta Utility District
 Brandon Main at bmain@gaud.ws

PASS ☐ **FAIL** ☐ **OTHER** ☐

Remarks

Service Restored ☐