TESTING PERFORMED UNDER MANUAL OF CROSS CONNECTION CONTROL, 10TH EDITION

WATER CUSTOMER INFORMATION					ASSEMBLY INFORMATION					
CUSTOMER NAME:				TYPE:		SERIAL NO.:				
CARE OF:				MODEL:		SI7E:		MFG:		
CARE OF:				TYPE OF SERVI					POOL	
MAILING ADDRESS:					EXISTING		☐ NEW		REPLACEMENT	
CITY, STATE, ZIP:					DCDA METER READING:					
					REPLACEMENT OLD ASSEMBLY SN:					
WATER CERVICE LOCATION										
WATER SERVICE LOCATION BUSINESS NAME:										
SERVICE ADDRESS:										
ASSEMBLY LOCATION:										
DEDODE OF THOSE DEDOUGED										
	DOUBLE OF	LIEOIZ			OF TEST RESULTS					
	DOUBLE CHECK VALVE ASSEMBLY REDUCED PRESSURE PRINCIPLE				A SSEMBLY		SPILL PROOF VACUUM BREAKER PRESSURE VACUUM BREAKER			
	CHECK VAL		CHECK VALVE		ASSEMBLI		FRESSORE VACOOM BREAKER			
	NO.1		NO.2		RELIEF VALVE		AIR INLET VA	ALVE	CHECK VA	LVE
INITIAL							BODY DRAINED			
TEST	CLOSED TIGHT		CLOSED TIGHT		OPENED AT:	psid	OPENED AT:	_•psid	CLOSED TIGHT	
		psid		psid	OPENED UNDER 2.0	•	1 0 peid OP	psiu		psid
	LEAKED		LEAKED		or DID NOT OPEN		DID NOT OPEN		LEAKED	
R	1) CLEANED		1) CLEANED		1) CLEANED		1) CLEANED		1) CLEANED	
E					2) EXERCISED		2) EXERCISED			
P	REPLACED:	_	REPLACED:	_	REPLACED:	_	REPLACED:	_	REPLACED:	_
	2) DISC 3) SPRING		2) DISC 3) SPRING		3) DISC(S) 4) SPRING		3) DISC 4) GUIDE		2) DISC 3) SPRING	
	4) GUIDE		4) GUIDE		5) DIAPHRAGM(S)		5) FLOAT		4) GUIDE	
	5) SEAT		5) SEAT		6) SEAT(S)		6) SEAT		5) SEAT	
	6) MODULE		6) MODULE		7) O-RING(S)		7) OTHER		6) MODULE	
	7) O-RINGS		7) O-RINGS		8) MODULE				7) OTHER	
	8) OTHER		8) OTHER		9) OTHER					
	CLOSED TIGHT		CLOSED TIGHT		OPENED AT:		OPENED AT:		CLOSED TIGHT	
TEST		psid		psid		psid		psid		psid
THE ABOVE REPORT IS CERTIFIED TO BE TRUE BY:										
INIITIAL	FEET Draw D	ا دء ا	STADT TIME.		END TIME.		DATE:			
INITIAL TEST Pass Fail START TIME: END TIME: DATE:										
NOTE: TO PASS, A 3 PSI BUFFER IS REQUIRED BETWEEN THE #1 CHECK AND THE RELIEF VALVE ON AN RP										
FINAL TEST Pass Fail START TIME:					END TIME:		DATE:			
AWWA CERTIFICATE #:					NAME (PRINT)					
					SIGNATURE					
MAIL TO: CITY OF DAVIS					COMMENTS					
			•							
PUBLIC WORKS ATTN: BACKFLOW										
4747 FTH CTDEET										
DAVIS, CA 95616										
Email to: PW/Woh@cityofdayis org					ORIGINAL TO CITY					

Email to: PWWeb@cityofdavis.org