S.S. Water Supply Corporation
PO Box 1000
La Vernia, Texas 78121
Phone 830-779-2837 Fax 830-779-5122

BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

Public Water Supply's Identification Number 2470015
SS Water Supply Corp's Point of Contact: Napolean Cervantes
Name/Location/Addr. where service is provided_____
_____
_____

The backflow assembly detailed below has been tested and maintained as required by the Texas Commission on Environmental Quality's regulation and is certified to be operating within acceptable parameters.

TYPE OF ASSEMBLY

_____Reducing Pressure Principle
_____Double Reducing Valve
_____Pressure Vacuum Breaker
_____Reduced Pressure Principle-Detector
_____Double Check-Detector
_____Spill-Resistant Pressure Vacuum Breaker

Manufacture:_____ Size:_____
Model Number:_____ Serial Number_____

Is the assembly installed in accordance with manufacturer's recommendations and SS Water Supply Corporation's Codes and was manufacturer's approved parts used? Y/N

	Reduced Pressure Principle Assembly Double Check Valve Assembly			Pressure Vacuum Breaker	
	1st Check	2nd Check	Relief Valve	Air Inlet	Check Valve
Initial Test	Held at__ psid Closed Tight__ Leaked____	Held at ____psid Closed tight___ Leaked____	Opened at __ psid Did Not Open__	Opened at _____psid Did Not Open__	Held at _____psid Leaked ____
Repairs and Materials Used					
Test after Repair	Held at _____psid Closed Tight__	Held at _____psid Closed Tight__	Opened at _____psid	Opened at _____psid	Held at _____psid

Test Gauge Used: Make /Model_____ SN_____Calibration Date_____
Remarks_____
The above is certified to be true at time of testing:
Firm Name_____ Certified Tester_____
Firm Phone Number_____ Cert. Tester No:BP-_____Date Certified_____
Firm Address:

DATE INSPECTION WAS DONE_____

*TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS