

CITY OF JANESVILLE

101 N. Mott Street

BACKFLOW PREVENTER TEST FORM-2018

(Per MN Plumbing Code 4714.0603 Sections 603.5.23.1 through 603.5.23.4)

CUSTOMER \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

LOCATION OF ASSEMBLY \_\_\_\_\_

TYPE OF ASSEMBLY RPZ \_\_\_\_\_ PVB \_\_\_\_\_ DCV \_\_\_\_\_ SVB \_\_\_\_\_ SIZE \_\_\_\_\_

MANUFACTURER \_\_\_\_\_ MODEL \_\_\_\_\_ SERIAL # \_\_\_\_\_

RELIEF VALVE \_\_\_\_\_ CHECK VALVE # 1 \_\_\_\_\_ CHECK VALVE # 2 \_\_\_\_\_ PVB  
Confirmation test

Opened \_\_\_\_\_ PSID      Closed tight \_\_\_\_\_ PSID      Closed tight \_\_\_\_\_ PSID      Air inlet opened \_\_\_\_\_ PSID  
Did not open \_\_\_\_\_      Leaked \_\_\_\_\_      Leaked \_\_\_\_\_      Did not open \_\_\_\_\_  
  
Check closed tight \_\_\_\_\_ PSID  
Check leaked \_\_\_\_\_

Cleaned only _____	Cleaned only _____	Cleaned only _____	Cleaned only _____
Replaced:	Replaced:	Replaced:	Replaced:
- Rubber kit _____	- Rubber kit _____	- Rubber kit _____	- Rubber kit _____
- RV assy. _____	- CV assy. _____	- CV assy. _____	- CV assy. _____
or disc _____	or disc _____	or disc _____	air-in disc _____
- Diaphragm _____	- O-rings _____	- O-rings _____	- O-rings _____
seat _____	- Seat _____	- Seat _____	- Air spring _____
- Spring _____	- Spring _____	- Spring _____	- CV spring _____
- Guide _____	- Stem guide _____	- Guide _____	- Retainer _____
- O-rings _____	- Retainer _____	- Retainer _____	- Guide _____
- Other _____	- Lock nuts _____	- Lock nuts _____	- O-ring _____
	- Other _____	- Other _____	- Other _____

R.V. opened at \_\_\_\_\_ Ck # 1 \_\_\_\_\_ PSID      Ck # 2 \_\_\_\_\_ PSID      Air inlet opened \_\_\_\_\_ PSID  
Check valve opened \_\_\_\_\_ PSID

NOTE: ALL REPAIRS SHALL BE COMPLETED WITHIN TEN (10) DAYS.

REMARKS \_\_\_\_\_

I HEREBY CERTIFY THAT THIS DATE AND INFORMATION IS ACCURATE AND REFLECTS THE PROPER OPERATION AND MAINTENANCE OF THE ASSEMBLY.

ASSECERT # \_\_\_\_\_ STATE CERT # \_\_\_\_\_

TESTING EQUIPMENT MODEL \_\_\_\_\_ SERIAL # \_\_\_\_\_

DATE LAST ANNUAL TESTING EQUIPMENT CHECK \_\_\_\_\_

TESTER'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_