



# WATER UTILITIES LEE'S SUMMIT

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## BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT

CUSTOMER: FAIRWAY CONSTRUCTION (WILSHIRE MEMORY CARE)  
 SERVICE ADDRESS: 3320 NE WILSHIRE DRIVE  
 LOCATION OF BACKFLOW ASSEMBLY ON PROPERTY: Inground

DATE OF TEST: 11-8-17 TIME: 10:00  A.M.  P.M. SUPPLY PRESSURE: 100 LBS AIR GAP (2 X SUPPLY DIAMETER) SUPPLY: \_\_\_\_\_ IN. GAP: \_\_\_\_\_ IN.  PASS  FAIL

TYPE OF ASSEMBLY:  DC  RP  DCDA (DETECTOR)  RPD (DETECTOR)  PVB\* (SEE BOTTOM OF FORM) MANUFACTURER: Febco MODEL: 850 SIZE: 2" SERIAL NUMBER: \_\_\_\_\_

HEIGHT OFF FLOOR: \_\_\_\_\_ FT \_\_\_\_\_ IN PROTECTION FROM: FREEZING  YES  NO FLOODING  YES  NO SUPPLY SOURCE:  PUBLIC POTABLE WATER  NON-POTABLE WATER (e.g., LAKE)  BOTH NEW INSTALLATION:  YES  NO

INITIAL TEST	PASSED	FAILED
<b>REDUCED PRESSURE PRINCIPLE ASSEMBLY:</b>	<input type="checkbox"/>	<input type="checkbox"/>
RELIEF VALVE OPENED AT _____ PSID (2 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>
2ND CHECK held backpressure	<input type="checkbox"/>	<input type="checkbox"/>
NO. 2 SHUTOFF VALVE leak tight	<input type="checkbox"/>	<input type="checkbox"/>
1ST CHECK held in direction of flow _____ PSID (5 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>
DIFFERENCE (1st check - relief) _____ PSID (3 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: Failure of any of the above items, requires repair.

FINAL TEST AFTER REPAIR	PASSED	FAILED
<b>REDUCED PRESSURE PRINCIPLE ASSEMBLY:</b>	<input type="checkbox"/>	<input type="checkbox"/>
RELIEF VALVE OPENED AT _____ PSID (2 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>
2ND CHECK held backpressure	<input type="checkbox"/>	<input type="checkbox"/>
NO. 2 SHUTOFF VALVE leak tight	<input type="checkbox"/>	<input type="checkbox"/>
1ST CHECK held in direction of flow _____ PSID (5 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>
DIFFERENCE (1st check - relief) _____ PSID (3 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: Failure of any of the above items, requires repair.

INITIAL TEST	PASSED	FAILED
<b>DOUBLE CHECK VAVLE ASSEMBLY:</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1ST CHECK held in direction of flow <u>2.5</u> PSID (1 PSID or more)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2ND CHECK held backpressure	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2ND CHECK held in direction of flow <u>2.5</u> PSID (1 PSID or more)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NO. 2 SHUTOFF VALVE leak tight	<input checked="" type="checkbox"/>	<input type="checkbox"/>

NOTE: Failure of any of the above items, requires repair.

FINAL TEST AFTER REPAIR	PASSED	FAILED
<b>DOUBLE CHECK VAVLE ASSEMBLY:</b>	<input type="checkbox"/>	<input type="checkbox"/>
1ST CHECK held in direction of flow _____ PSID (1 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>
2ND CHECK held backpressure	<input type="checkbox"/>	<input type="checkbox"/>
2ND CHECK held in direction of flow _____ PSID (1 PSID or more)	<input type="checkbox"/>	<input type="checkbox"/>
NO. 2 SHUTOFF VALVE leak tight	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: Failure of any of the above items, requires repair.

<b>APPLICATION:</b> <input type="checkbox"/> COMMERCIAL <input checked="" type="checkbox"/> IRRIGATION <input type="checkbox"/> FIRE LINE <input type="checkbox"/> FIRE LINE BY-PASS **METER # _____ **METER READ _____ <input type="checkbox"/> POINT OF USE	COMMENTS
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**THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE**

TESTED BY (PRINT): <u>Elton Weers</u> (SIGNATURE): <u>[Signature]</u>	REPAIRED BY (PRINT): _____ (SIGNATURE): _____	DATE OF REPAIR: _____
COMPANY: <u>Rosehill Gardens</u>	FINAL TEST BY (PRINT): _____ (SIGNATURE): _____	DATE OF FINAL TEST: _____
MISSOURI CERTIFICATION NUMBER: <u>34-10153</u>	EXPIRATION DATE: <u>2-28-2019</u>	OWNER OR OWNER'S REPRESENTATIVE: _____ DATE: _____

\* If an existing PVB is beyond repair and needs replacement, it should be replaced by a DC or RP to meet current State and City regulations. New PVB installations or replacements are not permitted.  
 \*\* METER # and METER READ for the fire line by-pass meter on detector assemblies are required.  
 Missouri State Regulation 10 CSR 60-11-010(6)(E) requires testers to report results of tests and inspections to the customer and water supplier.