

220 SE GREEN ST, LEE'S SUMMIT, MO 64064 PHONE: (816) 969-1930 FAX: (816) 969-1935

FEE 2 201					w@cityofls.net		ter.net	
BACKFLOW PREVENT	ON ASSE	EMBLY TE	EST DATA AN	D MAINTENA	NCE REPORT			
CUSTOMER								
SERVICE ADDRESS								
1120 N.W. Mala		Lee's	Summit	640	86			
LOCATION OF BACKFLOW ASSEMBLY ON PROPERTY	/							
DATE OF TEST TIME NAM	SUPPLY PR	RESSURE	AIR GAP (2 X SUP	PLY DIAMTER)			levii.	
9-6-23 10:08 DPM	100	LBS	SUPPLY	IN GAP		PASS	FAIL	
TYPE OF ASSEMBLY DC RP MANUFACTURER		MODEL	(7	SIZE	SERIAL NUMBER	77		
DCDA (DETECTOR) RPDA (DETECTOR) PVB* (SEE BOTTOM OF FORM) Watts		/	57		WH-123		ION	
HEIGHT OFF FLOOR PROTECTION FROM FT IN FREEZING ☑ YES □ NO FLOOD	ING ☐ YES	⊠ NO		IC POTABLE WATER POTABLE WATER (e	I BOTH I	WINSTALLAT	NO	
INITIAL TEST	PASSED	FAILED	FINA	AL TEST AFTER	REPAIR	PASSED	FAILED	
REDUCED PRESSURE PRINCIPLE ASSEMBLY:			REDUCED PRESSURE		CIPLE ASSEMBLY:			
RELIEF VALVE OPENED AT PSID (2 PSID or more)			RELIEF VALVE OPENED AT		D (2 PSID or more)			
OPENED AT PSID (2 PSID or more)								
2ND CHECK held backpressure			2ND CHECK h	eld backpressure	9			
NO. 2 SHUTOFF VALVE leak tight			NO. 2 SHUTO	FF VALVE leak ti	ght			
1ST CHECK held in				1ST CHECK held in direction of flow PSID (5 PSID or more)				
direction of flow PSID (5 PSID or more)					D (3 F3ID of filore)			
OIFFERENCE (1st check - relief) PSID (3 PSID or more)			DIFFERENCE (1st check -		O (3 PSID or more)			
NOTE: Failure of any of the above items, requires	s repair.		NOTE: Failure	of any of the al	oove items, require	s repair.		
INITIAL TEST	PASSED	FAILED		EST AFTER REP		PASSED	FAILED	
DOUBLE CHECK VAVLE ASSEMBLY:	\times			ECK VAVLE ASS	SEMBLY:			
1ST CHECK held in direction of flow 1.6 PSID (1 PSID or more)	\boxtimes		1ST CHECK h		D (1 PSID or more)			
	区			neld backpressur				
2ND CHECK held backpressure								
2ND CHECK held in direction of flow 2.4 PSID (1 PSID or more)	$\overline{\times}$		2ND CHECK h		D (1 PSID or more)			
				FF VALVE leak t				
NO. 2 SHUTOFF VALVE leak tight						c ronair		
NOTE: Failure of any of the above items, requires repair. NOTE: Failure of any of the above items, requires repair.								
APPLICATION:								
COMMERCIAL								
☐ IRRIGATION								
✓ FIRE LINE								
FIRE LINE BY-PASS								
**METER #								
**METER READ								
☐ POINT OF USE								
THE ABOVE REPORT IS CERTIFIED TO	BE TRU	E, ACCU	RATE AND C	OMPLETE				
	IATURE)	1.		(PRINT)	(SIGNATURE)	DATE OF	REPAIR	
Brian Rosenfeld Man 1	2///		FINAL TEST BY	(PRINT)	(SIGNATURE)	DATE OF	FINAL TEST	
Central Plansing				**************************************	• • • • • • • • • • • • • • • • • • • •			
MISSOURI CERTIFICATION NUMBER EXPIRATIO			OWNER OR OWNER	S'S REPRESENTATIV	E DA	TE.		
14-11526 12-31	-53					102	-4!	
* If an existing PVB is beyond repair and needs	replaceme	ent, it should	d be replaced by	a DC or RP to m	eet current State an	d City regula	ations.	

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.



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BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT CUSTOMER Scannel 20 N.W. Man, Lee's Summit 64086 water room DATE OF TEST MAM SUPPLY PRESSURE AIR GAP (2 X SUPPLY DIAMTER) PASS FAIL LBS SUPPLY TYPE OF ASSEMBLY SERIAL NUMBER MODEL DCDA (DETECTOR) RPDA (DETECTOR)
PVB* (SEE BOTTOM OF FORM) 957 HEIGHT OFF FLOOR PROTECTION FROM SUPPLY PUBLIC POTABLE WATER BOTH NO SOURCE NON-POTABLE WATER (e.g., LAKE) FREEZING YES NO FLOODING YES NO PASSED FAILED FINAL TEST AFTER REPAIR **INITIAL TEST** PASSED FAILED REDUCED PRESSURE PRINCIPLE ASSEMBLY: REDUCED PRESSURE PRINCIPLE ASSEMBLY: RELIEF VALVE RELIEF VALVE 3,2 PSID (2 PSID or more) PSID (2 PSID or more) OPENED AT OPENED AT 2ND CHECK held backpressure 2ND CHECK held backpressure X NO. 2 SHUTOFF VALVE leak tight NO. 2 SHUTOFF VALVE leak tight 1ST CHECK held in 1ST CHECK held in 9.6 PSID (5 PSID or more) direction of flow ____ PSID (5 PSID or more) X direction of flow DIFFERENCE DIFFERENCE (1st check - relief) 6,4 PSID (3 PSID or more) (1st check - relief) ____ PSID (3 PSID or more) NOTE: Failure of any of the above items, requires repair. NOTE: Failure of any of the above items, requires repair. FINAL TEST AFTER REPAIR INITIAL TEST PASSED FAILED PASSED FAILED DOUBLE CHECK VAVLE ASSEMBLY: DOUBLE CHECK VAVLE ASSEMBLY: 1ST CHECK held in 1ST CHECK held in PSID (1 PSID or more) PSID (1 PSID or more) direction of flow direction of flow 2ND CHECK held backpressure 2ND CHECK held backpressure 2ND CHECK held in 2ND CHECK held in PSID (1 PSID or more) direction of flow PSID (1 PSID or more) direction of flow NO. 2 SHUTOFF VALVE leak tight NO. 2 SHUTOFF VALVE leak tight NOTE: Failure of any of the above items, requires repair. NOTE: Failure of any of the above items, requires repair. COMMENTS APPLICATION: Domestic Water Supply COMMERCIAL COMMERCIAL **IRRIGATION** FIRE LINE FIRE LINE BY-PASS **METER # _____ **METER READ ____ POINT OF USE THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE REPAIRED BY (PRINT) DATE OF REPAIR (SIGNATURE) TESTED BY Brian Rosentela FINAL TEST BY (PRINT) (SIGNATURE) DATE OF FINAL TEST COMPANY EXPIRATION DATE OWNER OR OWNER'S REPRESENTATIVE DATE 14-11526 12-31-23 * 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.



CUSTOMER

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BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT

Scannell												
SERVICE ADDRESS	. (1-	-11	. ()	111001							
1120 N.W. Main, Lee's Sommit 64086												
Vault												
9-26-23 TIME 10:15	ZAM □PM	SUPPLY PR		AIR GAP (2 X SUPPI SUPPLY	LY DIAMTER) IN GAP	IN. P	ASS	FAIL				
TYPE OF ASSEMBLY MANUFACTURE		100	MODEL		SIZE	SERIAL NUMBER						
DCDA (DETECTOR) RPDA (DETECTOR) PVB* (SEE BOTTOM OF FORM)	etts		007	M3 QT	3/4"	435664						
HEIGHT OFF FLOOR PROTECTION FROM			TR.v.o	SUPPLY PUBLIC		BOTH F	WINSTALLAT YES	NO NO				
FT IN FREEZING ☑ YES □	NO FLOODI	NG LIYES	NO	SOURCE NON-P		L.						
REDUCED PRESSURE PRINCIPLE AS:		PASSED	FAILED		L TEST AFTER ESSURE PRINC	REPAIR SIPLE ASSEMBLY:	PASSED	FAILED				
RELIEF VALVE			RELIEF VALVE									
OPENED AT PSID (2 PSID or more)			OPENED AT PSID (2 PSID or more)									
2ND CHECK held backpressure			2ND CHECK he									
NO. 2 SHUTOFF VALVE leak tight			NO. 2 SHUTOF									
1ST CHECK held in direction of flow PSID (5 PSID	or more)			1ST CHECK he direction of flo		0 (5 PSID or more)						
DIFFERENCE (1st check - relief) PSID (3 PSID or more)		П	DIFFERENCE (1st check - relief) PSID (3 PSID or more)									
NOTE: Failure of any of the above items, requires repair.			NOTE: Failure of any of the above items, requires repair.									
INITIAL TEST DOUBLE CHECK VAVLE ASSEMBLY:		PASSED	FAILED		ST AFTER REP CK VAVLE ASS		PASSED	FAILED				
1ST CHECK held in				1ST CHECK he								
direction of flow 1.5 PSID (1 PSID	or more)					D (1 PSID or more)						
2ND CHECK held backpressure		\boxtimes		2ND CHECK he	eld backpressure	е						
2ND CHECK held in direction of flow (1,5) PSID (1 PSID	or more)			2ND CHECK he direction of fl		D (1 PSID or more)						
NO. 2 SHUTOFF VALVE leak tight			NO. 2 SHUTOFF VALVE leak tight									
NOTE: Failure of any of the above item	s, requires	repair.		NOTE: Failure	of any of the al	oove items, requires	s repair.					
APPLICATION:	COMMENTS											
☐ COMMERCIAL ☐ IRRIGATION ☐ FIRE LINE ☐ FIRE LINE BY-PASS **METER # **METER READ ☐ POINT OF USE												
THE ABOVE REPORT IS CERTIF	IED TO E	BE TRUE	E, ACCU	RATE AND C	OMPLETE							
TESTED BY (PRINT)	the latest committee of the committee of	ATURE)	1	the same of the sa		(SIGNATURE)	DATE OF	REPAIR				
Brian Rosenfeld	150	n 1/1	M	FINAL TEST BY	(DDINIT)	(SIGNATURE)	DATE OF	CIMAL TEAT				
COMPANY (porter / Plumb)	20	-0		FINAL TEST BT	(PRINT)	(SIGNATURE)	DATE OF	FINAL TEST				
MISSOURI CERTIFICATION NUMBER EXPIRATION DATE			OWNER OR OWNER'S	S REPRESENTATIVE	DA	TE						
14-11526		1-23										
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