



LEE'S SUMMIT MISSOURI

BACKFLOW PREVENTION ASSEMBLY TEST DATA & MAINTENANCE REPORT

Coversheet

To better track reports please complete this coversheet for each PDF file you send. You may substitute your own detailed list, if you prefer. If the PDF file name identifies the report, no coversheet is needed.

INSPECTION COMPANY Aegis Fire Protection, LLC
DATE 2/9/2024
OF REPORTS 2

	Fill-in <i>one</i> identifier – you don't need to complete all 3		
DOC	Name	Address	Backflow #
1	LSFS #4	5031 N.E. Lakewood Way	XI-0106
2	LSFS #5	801 MO Highway 150	XI-0096
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Water Utilities

1200 SE Hamblen Road | Lee's Summit, MO 64081 | P: 816.969.1900 | F: 816.969.1935 | LSwater.net



WATER UTILITIES LEE'S SUMMIT

220 SE GREEN ST, LEE'S SUMMIT, MO 64064
PHONE: (816) 969-1930 FAX: (816) 969-1935
EMAIL: backflow@cityofls.net WEB: lswater.net

BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT

CUSTOMER Lee's Summit Fire Station #4			
SERVICE ADDRESS 5031 N.E. Lakewood Way Lee's Summit, MO 64064			
LOCATION OF BACKFLOW ASSEMBLY ON PROPERTY Mechanical Room N.W. corner of building			
DATE OF TEST 2/8/2024	TIME 2:10 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	SUPPLY PRESSURE 90 LBS	AIR GAP (2 X SUPPLY DIAMETER) SUPPLY _____ IN. GAP _____ IN. <input type="checkbox"/> PASS <input type="checkbox"/> FAIL
TYPE OF ASSEMBLY <input checked="" type="checkbox"/> DC <input type="checkbox"/> RP <input type="checkbox"/> DCDA (DETECTOR) <input type="checkbox"/> RPDA (DETECTOR) <input type="checkbox"/> PVB* (SEE BOTTOM OF FORM)	MANUFACTURER AMES	MODEL Colt 200	SIZE 3.0
HEIGHT OFF FLOOR 1' FT 0" IN		PROTECTION FROM: FREEZING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO FLOODING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SUPPLY SOURCE: <input checked="" type="checkbox"/> PUBLIC POTABLE WATER <input type="checkbox"/> NON-POTABLE WATER (e.g., LAKE) <input type="checkbox"/> BOTH		NEW INSTALLATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
INITIAL TEST		FINAL TEST AFTER REPAIR	
REDUCED PRESSURE PRINCIPLE ASSEMBLY:		REDUCED PRESSURE PRINCIPLE ASSEMBLY:	
RELIEF VALVE OPENED AT _____ PSID (2 PSID or more)		RELIEF VALVE OPENED AT _____ PSID (2 PSID or more)	
2ND CHECK held backpressure		2ND CHECK held backpressure	
NO. 2 SHUTOFF VALVE leak tight		NO. 2 SHUTOFF VALVE leak tight	
1ST CHECK held in direction of flow _____ PSID (5 PSID or more)		1ST CHECK held in direction of flow _____ PSID (5 PSID or more)	
DIFFERENCE (1st check - relief) _____ PSID (3 PSID or more)		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		FINAL TEST AFTER REPAIR	
DOUBLE CHECK VAVLE ASSEMBLY:		DOUBLE CHECK VAVLE ASSEMBLY:	
1ST CHECK held in direction of flow 2.0 PSID (1 PSID or more)		1ST CHECK held in direction of flow _____ PSID (1 PSID or more)	
2ND CHECK held backpressure		2ND CHECK held backpressure	
2ND CHECK held in direction of flow 2.6 PSID (1 PSID or more)		2ND CHECK held in direction of flow _____ PSID (1 PSID or more)	
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.	
APPLICATION:		COMMENTS	
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> IRRIGATION <input checked="" type="checkbox"/> FIRE LINE <input type="checkbox"/> FIRE LINE BY-PASS **METER # _____ **METER READ _____ <input type="checkbox"/> POINT OF USE			
THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE			
TESTED BY (PRINT) Jesse Samano		REPAIRED BY (PRINT) (SIGNATURE) Jesse Samano	
COMPANY Aegis Fire Protection, LLC		FINAL TEST BY (PRINT) (SIGNATURE)	
MISSOURI CERTIFICATION NUMBER 34-11865		OWNER OR OWNER'S REPRESENTATIVE DATE	
EXPIRATION DATE 12/31/2024			
* 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.			

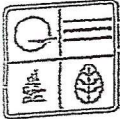


WATER UTILITIES LEE'S SUMMIT

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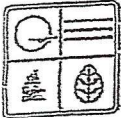
BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT

CUSTOMER Lee's Summit Fire Station #5			
SERVICE ADDRESS 801 Missouri Highway 150 Lee's Summit, MO 64082			
LOCATION OF BACKFLOW ASSEMBLY ON PROPERTY Mechanical Room N.E. corner of building			
DATE OF TEST 2/8/2024	TIME 3:15 <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	SUPPLY PRESSURE 90 LBS	AIR GAP (2 X SUPPLY DIAMETER) SUPPLY _____ IN. GAP _____ IN. <input type="checkbox"/> PASS <input type="checkbox"/> FAIL
TYPE OF ASSEMBLY <input checked="" type="checkbox"/> DC <input type="checkbox"/> RP <input type="checkbox"/> DCDA (DETECTOR) <input type="checkbox"/> RPDA (DETECTOR) <input type="checkbox"/> PVB* (SEE BOTTOM OF FORM)	MANUFACTURER AMES	MODEL Colt 200	SIZE 3.0
HEIGHT OFF FLOOR 1' FT 0" IN		PROTECTION FROM: FREEZING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO FLOODING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SUPPLY SOURCE: <input checked="" type="checkbox"/> PUBLIC POTABLE WATER <input type="checkbox"/> NON-POTABLE WATER (e.g., LAKE) <input type="checkbox"/> BOTH		NEW INSTALLATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
INITIAL TEST		FINAL TEST AFTER REPAIR	
REDUCED PRESSURE PRINCIPLE ASSEMBLY:		REDUCED PRESSURE PRINCIPLE ASSEMBLY:	
RELIEF VALVE OPENED AT _____ PSID (2 PSID or more)		RELIEF VALVE OPENED AT _____ PSID (2 PSID or more)	
2ND CHECK held backpressure		2ND CHECK held backpressure	
NO. 2 SHUTOFF VALVE leak tight		NO. 2 SHUTOFF VALVE leak tight	
1ST CHECK held in direction of flow _____ PSID (5 PSID or more)		1ST CHECK held in direction of flow _____ PSID (5 PSID or more)	
DIFFERENCE (1st check - relief) _____ PSID (3 PSID or more)		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		FINAL TEST AFTER REPAIR	
DOUBLE CHECK VAVLE ASSEMBLY:		DOUBLE CHECK VAVLE ASSEMBLY:	
1ST CHECK held in direction of flow 2.4 PSID (1 PSID or more)		1ST CHECK held in direction of flow _____ PSID (1 PSID or more)	
2ND CHECK held backpressure		2ND CHECK held backpressure	
2ND CHECK held in direction of flow 2.8 PSID (1 PSID or more)		2ND CHECK held in direction of flow _____ PSID (1 PSID or more)	
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.	
APPLICATION:		COMMENTS	
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> IRRIGATION <input checked="" type="checkbox"/> FIRE LINE <input type="checkbox"/> FIRE LINE BY-PASS **METER # _____ **METER READ _____ <input type="checkbox"/> POINT OF USE			
THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE			
TESTED BY (PRINT) Jesse Samano		REPAIRED BY (PRINT) (SIGNATURE) Jesse Samano	
COMPANY Aegis Fire Protection, LLC		FINAL TEST BY (PRINT) (SIGNATURE)	
MISSOURI CERTIFICATION NUMBER 34-11865		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.			



STATE OF MISSOURI
MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM - PUBLIC DRINKING WATER BRANCH
BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT

CUSTOMER LEES-SWAMIT FIRE STATION #4		CUSTOMER NUMBER		FILE NUMBER	
MAILING ADDRESS 5031 NE LAKEWOOD WAY 64664		METER NUMBER			
SERVICE LOCATION MECH RM		DATE OF TEST 2-8-24		TIME 2:10	
TYPE OF ASSEMBLY DC		MANUFACTURER AMES		MODEL C64T 200	
HEIGHT OFF FLOOR 1		PROTECTION FROM: FREEZING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		FLOODING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
INITIAL TEST REDUCED PRESSURE PRINCIPLE ASSEMBLY		Passed Failed <input type="checkbox"/> <input type="checkbox"/>		FINAL TEST AFTER REPAIR REDUCED PRESSURE PRINCIPLE ASSEMBLY:	
RELIEF VALVE OPENED AT _____ *PSID (2 PSID or more)		<input type="checkbox"/> <input type="checkbox"/>		RELIEF VALVE OPENED AT _____ *PSID (2 PSID or more)	<input type="checkbox"/> <input type="checkbox"/>
2 nd CHECK held backpressure		<input type="checkbox"/> <input type="checkbox"/>		2 nd CHECK held backpressure	<input type="checkbox"/> <input type="checkbox"/>
NO. 2 SHUTOFF VALVE leak tight		<input type="checkbox"/> <input type="checkbox"/>		NO. 2 SHUTOFF VALVE leak tight	<input type="checkbox"/> <input type="checkbox"/>
1 st CHECK held in direction of flow _____ *PSID (5 PSID or more)		<input type="checkbox"/> <input type="checkbox"/>		1 st CHECK held in direction of flow _____ *PSID (5 PSID or more)	<input type="checkbox"/> <input type="checkbox"/>
DIFFERENCE (1 st check - relief) _____ *PSID (3 PSID or more)		<input type="checkbox"/> <input type="checkbox"/>		DIFFERENCE (1 st check - relief) _____ *PSID (3 PSID or more)	<input type="checkbox"/> <input type="checkbox"/>
NOTE: Failure of any of the above items, requires repair.				*Pounds per Square Inch Differential	
INITIAL TEST DOUBLE CHECK VALVE ASSEMBLY:		Passed Failed <input checked="" type="checkbox"/> <input type="checkbox"/>		FINAL TEST AFTER REPAIR DOUBLE CHECK VALVE ASSEMBLY:	Passed Failed <input type="checkbox"/> <input type="checkbox"/>
1 st CHECK held in direction of flow 2.0 PSID (1 PSID or more)		<input type="checkbox"/> <input type="checkbox"/>		1 st CHECK held in direction of flow _____ PSID (1 PSID or more)	<input type="checkbox"/> <input type="checkbox"/>
2 nd CHECK held in direction of flow 2.6 PSID (1 PSID or more)		<input checked="" type="checkbox"/> <input type="checkbox"/>		2 nd CHECK held in direction of flow _____ PSID (1 PSID or more)	<input type="checkbox"/> <input type="checkbox"/>
NOTE: Failure of any of the above items, requires repair.					
APPLICATION: <input type="checkbox"/> COMMERCIAL <input checked="" type="checkbox"/> FIRE LINE <input type="checkbox"/> IRRIGATION <input type="checkbox"/> OTHER (EXPLAIN)		COMMENTS			
THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE					
TESTED BY (PRINT) JESSIE		PREPARED BY (PRINT)		(SIGNATURE)	
COMPANY		FINAL TEST BY (PRINT)		(SIGNATURE)	
CERTIFICATION NUMBER AND EXPIRATION DATE 34-17865 12-31-24		OWNER OR OWNER'S REPRESENTATIVE		DATE	
Missouri State regulation 10 CSR 60-11.010(6) (E) requires testers to report results of tests and inspections to the customer and the water supplier.					



STATE OF MISSOURI
MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM—PUBLIC DRINKING WATER BRANCH
BACKFLOW PREVENTION ASSEMBLY TEST DATA AND MAINTENANCE REPORT

CUSTOMER CEES SUMMIT FIRE STATION #5		CUSTOMER NUMBER		FILE NUMBER
MAILING ADDRESS 801 MO HWY 150 G4022				METER NUMBER
SERVICE LOCATION MECH RM		DATE OF TEST 2-8-24		TIME 3:15 P.M.
TYPE OF ASSEMBLY DC		MANUFACTURER AMES	SUPPLY PRESSURE 90 LBS.	AIR GAP (2x SUPPLY DIAM.) SUPPLY IN GAP IN
HEIGHT OFF FLOOR 1		MODEL CCT 200	SIZE 3	SERIAL NUMBER X1-0096
PROTECTION FROM: FREEZING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		FLOODING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		COMMENTS:
NEED INSTALLATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
INITIAL TEST		FINAL TEST AFTER REPAIR		
REDUCED PRESSURE PRINCIPLE ASSEMBLY		REDUCED PRESSURE PRINCIPLE ASSEMBLY:		
RELIEF VALVE OPENED AT _____ *PSID (2 PSID or more)		RELIEF VALVE OPENED AT _____ *PSID (2 PSID or more)		
2 nd CHECK held backpressure		2 nd CHECK held backpressure		
NO. 2 SHUTOFF VALVE leak tight		NO. 2 SHUTOFF VALVE leak tight		
1 st CHECK held in direction of flow _____ *PSID (5 PSID or more)		1 st CHECK held in direction of flow _____ *PSID (5 PSID or more)		
DIFFERENCE (1 st check—relief) _____ *PSID (3 PSID or more)		DIFFERENCE (1 st check—relief) _____ *PSID (3 PSID or more)		
NOTE: Failure of any of the above items, requires repair.		*Pounds per Square Inch Differential		
INITIAL TEST		FINAL TEST AFTER REPAIR		
DOUBLE CHECK VALVE ASSEMBLY:		DOUBLE CHECK VALVE ASSEMBLY:		
1 st CHECK held in direction of flow 2.4 PSID (1 PSID or more)		1 st CHECK held in direction of flow _____ PSID (1 PSID or more)		
2 nd CHECK held in direction of flow 2.8 PSID (1 PSID or more)		2 nd CHECK held in direction of flow _____ PSID (1 PSID or more)		
NOTE: Failure of any of the above items, requires repair.				
APPLICATION:		COMMENTS		
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> FIRE LINE <input type="checkbox"/> IRRIGATION <input type="checkbox"/> OTHER (EXPLAIN)				
THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE				
TESTED BY (PRINT) JESSE		PREPARED BY (PRINT)		(SIGNATURE)
COMPANY		FINAL TEST BY (PRINT)		(SIGNATURE)
CERTIFICATION NUMBER AND EXPIRATION DATE 34-11865 12/31/24		OWNER OR OWNER'S REPRESENTATIVE		DATE
Missouri State regulation 10 CSR 60-11.010(6) (E) requires testers to report results of tests and inspections to the customer and the water supplier.				