



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

CUSTOMER <u>Dustin Webber</u>		CUSTOMER NUMBER		FILE NUMBER
MAILING ADDRESS <u>1225 NE Goshen Lee's Summit</u>				
SERVICE LOCATION <u>Basement</u>				METER NUMBER
DATE OF TEST <u>5-29-24</u>	TIME <u>1:30</u> <input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	SUPPLY PRESSURE <u>65</u> LBS.	AIR GAP (2 x SUPPLY DIAM.) SUPPLY <u>3/4</u> IN. GAP <u>3/4</u> IN.	<input type="checkbox"/> PASS <input type="checkbox"/> FAIL
TYPE OF ASSEMBLY <u>DC</u>	MANUFACTURER <u>Felco</u>	MODEL <u>850</u>	SIZE <u>3/4</u>	SERIAL NUMBER <u>AG31965</u>
HEIGHT OFF FLOOR <u>4ft</u>	PROTECTION FROM: FREEZING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO FLOODING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		COMMENTS: NEW INSTALLATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<b>INITIAL TEST</b>				
<b>REDUCED PRESSURE PRINCIPLE ASSEMBLY</b>		Passed Failed	<b>FINAL TEST AFTER REPAIR</b>	
RELIEF VALVE OPENED AT _____ *PSID (2 PSID or more)		<input type="checkbox"/> <input type="checkbox"/>	<b>REDUCED PRESSURE PRINCIPLE ASSEMBLY:</b>	
2 <sup>nd</sup> CHECK held backpressure		<input type="checkbox"/> <input type="checkbox"/>	RELIEF VALVE OPENED AT _____ *PSID (2 PSID or more)	
NO. 2 SHUTOFF VALVE leak tight		<input type="checkbox"/> <input type="checkbox"/>	2 <sup>nd</sup> CHECK held backpressure	
1 <sup>st</sup> CHECK held in direction of flow _____ *PSID (5 PSID or more)		<input type="checkbox"/> <input type="checkbox"/>	NO. 2 SHUTOFF VALVE leak tight	
DIFFERENCE (1 <sup>st</sup> check - relief _____ *PSID (3 PSID or more)		<input type="checkbox"/> <input type="checkbox"/>	1 <sup>st</sup> CHECK held in direction of flow _____ *PSID (5 PSID or more)	
NOTE: Failure of any of the above items, requires repair.			DIFFERENCE (1 <sup>st</sup> check - relief _____ *PSID (3 PSID or more)	
			*Pounds per Square Inch Differential	
<b>INITIAL TEST</b>				
<b>DOUBLE CHECK VALVE ASSEMBLY:</b>		Passed Failed	<b>FINAL TEST AFTER REPAIR</b>	
1 <sup>st</sup> CHECK held in direction of flow <u>3.0</u> PSID (1 PSID or more)		<input checked="" type="checkbox"/> <input type="checkbox"/>	<b>DOUBLE CHECK VALVE ASSEMBLY:</b>	
2 <sup>nd</sup> CHECK held in direction of flow <u>2.4</u> PSID (1 PSID or more)		<input checked="" type="checkbox"/> <input type="checkbox"/>	1 <sup>st</sup> CHECK held in direction of flow _____ PSID (1 PSID or more)	
NOTE: Failure of any of the above items, requires repair.			2 <sup>nd</sup> CHECK held in direction of flow _____ PSID (1 PSID or more)	
<b>APPLICATION:</b>		<b>COMMENTS</b>		
<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> FIRE LINE <input checked="" type="checkbox"/> IRRIGATION <input type="checkbox"/> OTHER (EXPLAIN)				
<b>THE ABOVE REPORT IS CERTIFIED TO BE TRUE, ACCURATE AND COMPLETE</b>				
TESTED BY (PRINT) <u>Dylan Wimmer</u>		PREPARED BY (PRINT) _____		(SIGNATURE) _____
COMPANY <u>Veteran Fire &amp; Backflow</u>		FINAL TEST BY (PRINT) _____		(SIGNATURE) _____
CERTIFICATION NUMBER AND EXPIRATION DATE <u>34-10389 10-31-2025</u>		OWNER OR OWNER'S REPRESENTATIVE		DATE <u>5-29-24</u>
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.				