NA**WSC**
National ●Water Specialties Company

Main | Add Test | Review Unsubmitted Tests | Payment Methods |

Your transaction has been successfully processed.

Checkout Receipt

Serial#	Description		Price
533860	900 ARMORY DR - Inside		$17.00
		Subtotal:	$17.00
Transaction Id: 61726948646		**Total Paid:**	**$17.00**

Ok   Print Receipt

NAWSC
National Water Specialties Company

Backflow Prevention Assembly
Test Report

Test Confirmation #   **Unsubmitted**

Address:	**900 ARMORY DR**	Hazard ID: **3237711**	Manufacturer: **Watts**
Company:	**U S ARMY/COMD 99TH ARCOM** Meter #: **901619**		Model: **909**
Location:	**Inside**		Type: **RP**
Serial #:	**533860**		Size: **0.75**
Contact:			

	Reduced Pressure Principle Assembly			PVB/SVB
	Double Check Valve Assembly			
Initial Test	**Check Valve #1**	**Check Valve #2**	**Relief Valve**	**AIR INLET**
02/11/19	Leaked ☐	Leaked ☐		Did not Open ☐
				Opened at ____ PSID
Pass Fail	Closed Tight ☒	Closed Tight ☒	Did not Open ☐	**CHECK VALVE**
☒ ☐	Held at 7.4 PSID	Held at 7.6 PSID	Opened at 5.4 PSID	Leaked ☐
				Held at ____ PSID
Repairs	Comments:			
	☐ Cleaned			
	☐ Rubber Kit			
	☐ Rebuild			
Final Test	**Check Valve #1**	**Check Valve #2**	**Relief Valve**	**AIR INLET**
				Opened at ____ PSID
Pass Fail	Closed Tight ☐	Closed Tight ☐		**CHECK VALVE**
☐ ☐	Held at ____ PSID	Held at ____ PSID	Opened at ____ PSID	Held at ____ PSID

Proper Shutoff ☐
No 2 Shutoff
Service Restored ☐
RV Exercised ☐
Held Backpressure ☐
Comments: Line PSI
Meter Reading   0

Cert. Tester   BOJAN MARTINOVICH(#40405)   Company:
(#):
Company Address:

Test Kit: Calibration Date: 01/01/1900

BACKFLOW PREVENTION ASSEMBLY
TEST & MAINTENANCE FORM
THIS FORM MUST BE COMPLETED BY AN ASSE-CERTIFIED TESTER

1. GENERAL INFORMATION

NAME OF FACILITY	SERVICE ADDRESS		SERVICE CLASS
U S ARMY/COMD 99TH ARCOM	900 ARMORY DR GREENSBURG, PA 15601		MUNICIPAL

DEVICE LOCATION	HAZARD ID # 3237711		ACCOUNT NUMBER G 09393	METER # 901619	
MANUFACTURER Watts	MODEL 909		SERIAL NO. 533860	SIZE .75	TYPE RP

2. TEST & REPAIR INFORMATION

	CHECK VALVE NO. 1	CHECK VALVE NO. 2	DIFFERENTIAL PRESSURE RELIEF VALVE	PRESSURE VACUUM BREAKER
INITIAL TEST	☐ LEAKED ☐ CLOSED TIGHT PRESSURE DROP ACROSS FIRST CHECK VALVE ____ PSID	☐ LEAKED ☐ CLOSED TIGHT PRESSURE DROP ACROSS SECOND CHECK VALVE ____ PSID	☐ OPEN AT ____ PSID ☐ DID NOT OPEN	☐ AIR NET OPENED AT ____ PSID ☐ DID NOT OPEN ☐ CHECK VALVE ____ PSID ☐ CHECK VALVE LEAKED
REPAIR				
FINAL TEST	☐ LEAKED ☒ CLOSED TIGHT PRESSURE DROP ACROSS FIRST CHECK VALVE 7.4 PSID	☐ LEAKED ☒ CLOSED TIGHT PRESSURE DROP ACROSS SECOND CHECK VALVE 1.6 PSID	☒ OPEN AT 5.4 PSID ☐ DID NOT OPEN	☐ AIR NET OPENED AT ____ PSID ☐ DID NOT OPEN ☐ CHECK VALVE ____ PSID ☐ CHECK VALVE LEAKED
REMARKS	CONDITION OF NO. 2 CONTROL VALVE ☐ CLOSED TIGHT ☐ LEAKED		LINE PRESSURE ____ PSIG	DATE _____ PASS DATE _____ FAIL

3. APPROVALS

"I Hereby Certify that this Data is Accurate and Reflects the Proper Operation and Maintenance of the Assembly."

NAME OF CERTIFIED BACKFLOW TESTER (PRINT) Bojan Martinovich	PHONE NUMBER 412-795-3040	BUSINESS NAME Sentry Mechanical	
TEST GAUGE SERIAL NUMBER Watts TK9A		TEST GAUGE LAST CALIBRATION DATE 7-31-2018	
INITIAL TEST	SIGNATURE OF INITIAL TESTER	CERTIFIED TESTER NUMBER	DATE
REPAIRS	SIGNATURE OF REPAIRER	CERTIFIED TESTER NUMBER (IF APPLICABLE)	DATE
FINAL TEST	SIGNATURE OF FINAL TESTER Bojan M Miller	CERTIFIED TESTER NUMBER 40405	DATE 2/11/19

All testers must have current ASSE Certification. The tester is required to submit the completed Backflow Prevention Assembly Test & Maintenance Report(s) to our Cross-Connection Department online at pawsc.tokaytest.com. Each individual Backflow Prevention Assembly Test & Maintenance Form submitted online requires a $17 submission fee, payable online. Reports submitted by mail require a $25 submission fee. These forms may not be submitted via email or fax.

DUE DATE: FEBRUARY 28, 2019

«NCode»-«Merge Sequence #»-«HazID»