CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)

INSPECTION, TESTING, AND CERTIFICATION OF WORK
(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: __PA118_____ Date of Visit: __08/23/2019_____

Contractor Personnel on Site:

1. __Joseph Benz_____   4. _____

2. _____   5. _____

3. _____   6. _____

Work Performed:

Inspection, Testing, and Certification

1. __Backflow Testing (Qty 2)_____

2. __WO 10334 Asset 7249_____

3. __WO 10334 Asset 7259_____

4. _____

CERTIFICATION OF WORK

To be signed by the Contractor:

Print Name: __Joseph Benz_____ Date: __08/23/2019___

Signed: _____

To be signed by Facility Manager:

By signing the Certification of Work, the said government representative signature does not constitute acceptance of any work performed by the contractor, it only acknowledges that the contractor was on-site during the identified timeline:

Print Name/Rank: __Mike Pennington_____ Date: __8/23/19___

Signed: _____

E-Mail: __Michael.a.pennington.civ@mail.mil_____

ASSE International

Double Check Backflow Prevention Assembly (DC)
ASSE Standard #1015 Field Test Report

Owner of Property PA118

Address 6467 MIKEWOOD BLVD.

City CONNEAUT LAKE State PA Zip Code 16316

Occupant of Property (if different from owner)

Occupant Address

City State Zip Code

Manufacturer of Assembly: WILKINS Model #: 350XL

Size of Assembly: 1" Serial #: A403068

Location of Assembly and Equipment or System Application: MECHANICAL ROOM
EQUIPMENT (PRESSURE WASHING AND HOSE BIBBS) ISOLATION

Test Equipment:

Manufacturer: WATTS Model #: TK9A Serial #: 0104817

Calibration Date: 04/25/2019

Date test was performed: 08/23/2019 **Time test was performed:** 3:00 PM **Static Line Pressure:** 50 PSI

	Check Valve #1	Check Valve #2	Shutoff valve #2
Initial Test	Leaking ( ) psid 2.2 Closed Tight (✔)	Leaking ( ) psid 2.0 Closed Tight (✔)	Leaking ( ) Closed Tight (✔)
Describe parts and repairs when needed			
Final Test	Leaking ( ) psid 2.2 Closed Tight (✔)	Leaking ( ) psid 2.0 Closed Tight (✔)	Leaking ( ) Closed Tight (✔)

Certified Tester (print) Joseph G Benz

Address 5225 Library Road, Suite 146

City Bethel Park State PA Zip 15102

Phone #: (412)852-4966

License #: H.P. 0683 Certification # ASSE5429

Assembly Final Performance

Pass ✔

Fail ☐
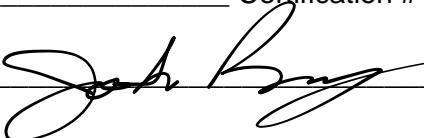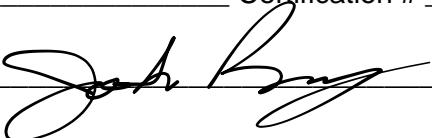
Signature _[signature]_ Date: 08/23/2019

Comments or Recommendations (continue to other side, if needed):

ASSE International
Double Check Backflow Prevention Assembly (DC)
ASSE Standard #1015 Field Test Report

Owner of Property PA118

Address 6467 MIKEWOOD BLVD.

City CONNEAUT LAKE   State PA   Zip Code 16316

Occupant of Property (if different from owner)

Occupant Address

City   State   Zip Code

Manufacturer of Assembly: CONBRACO   Model #: 4010002

Size of Assembly: 3"   Serial #: NB828

Location of Assembly and Equipment or System Application: POINT OF ENTRY - MECHANICAL ROOM
DOMESTIC CONTAINMENT

Test Equipment:

Manufacturer: WATTS   Model #: TK9A   Serial #: 0104817

Calibration Date: 04/25/2019

Date test was performed: 08/23/2019 **Time test was performed:** 2:55 PM **Static Line Pressure:** 50 PSI

	Check Valve #1	Check Valve #2	Shutoff valve #2
Initial Test	Leaking ( ) psid 1.8 Closed Tight (✔)	Leaking ( ) psid 2.0 Closed Tight (✔)	Leaking ( ) Closed Tight (✔)
Describe parts and repairs when needed			
Final Test	Leaking ( ) psid 1.8 Closed Tight (✔)	Leaking ( ) psid 2.0 Closed Tight (✔)	Leaking ( ) Closed Tight (✔)

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Signature _(signed)_   Date: 08/23/2019

Assembly Final Performance

Pass ☐

Fail ☑

Comments or Recommendations (continue to other side, if needed):