

WV 053-01

WHEELING, WV JOE NURRE LANE

W.O. # 2340 ASSET # 7205

INSPECTION REPORT FOR CROSS-CONNECTION AND BACKFLOW-PREVENTION ASSEMBLY

Name of Owner: _____

Mailing Address: _____

Street: _____

City, State, Zip _____

Name of Premises: _____

US ARMY BASE

Street Address: _____

Street: 109 Joe Nurre Lane

City, State, Zip _____

Wheeling, WV 26003

Location of Assembly: _____

Boiler Room

Installation Date: _____

Type of Assembly: _____

RP2

Manufacturer: _____

WATTS

Size: _____

1"

Model Number: _____

009M2QT

Serial Number: _____

368597

Meter Number Associated with above Backflow Preventor: _____

73124115

Tested by (Firm Name): _____

CMI MGT, INC / FRANCIS SAPIENZA

Business Address: _____

Street: _____

City, State, Zip _____

Telephone No. _____

Date of Initial Test: _____

2-2-18

Passed: _____

✓

Failed: _____

Date of Retest: _____

I certify that I have tested the above assembly and that it meets the performance requirements


 (Signature of Licensed Tester)

 ASSE # 30207
 (License Number of Tester)
Line Pressure at Time of Test 50 psi

	CHECK VALVE 1	CHECK VALVE 2	DIFFERENTIAL PRESSURE RELIEF VALVE
Initial Test	1. Leaked _____ 2. Closed Tight <input checked="" type="checkbox"/> <u>7.8</u> psid	1. Leaked _____ 2. Closed Tight <input checked="" type="checkbox"/> <u>4.2</u> psid	1. Opened at <u>2.9</u> psid 2. Did not Open _____
R	Cleaned: _____	Cleaned: _____	Cleaned: _____
E	Replaced: <u>Steady at</u>	Replaced: <u>Steady at</u>	Replaced: _____
P	Disc _____	Disc _____	Disc _____
A	Spring _____	Spring _____	Spring _____
I	Guide _____	Guide _____	Guide _____
R	Pin Retainer _____	Pin Retainer _____	Pin Retainer _____
S	Hinge Pin _____	Hinge Pin _____	Hinge Pin _____
	Seat _____	Seat _____	Seat _____
	Diaphragm _____	Diaphragm _____	* Diaphragm _____
	Other, describe _____	Other, describe _____	Other, describe _____
Final Test	RP _____ psid Closed Tight _____	Closed Tight _____	Open at _____ psid reduced pressure

Remarks: _____

WV 053-01

JOE NURRE LANE

WHEELING, WV

W.O. #2340

ASSET # 7206

INSPECTION REPORT FOR CROSS-CONNECTION AND BACKFLOW-PREVENTION ASSEMBLY

Name of Owner: _____

Mailing Address: _____

Street: _____

City, State, Zip _____

Name of Premises: _____

US ARMY BASE

Street Address: _____

Street: 109 Joe Nurre Lane

City, State, Zip Wheeling, WV 26003

Location of Assembly: _____

Boiler Room

Installation Date: _____

Type of Assembly: _____

RPZ

Manufacturer: _____

WATTS

Size: _____

3"

Model Number: _____

UNKNOWN - TAG GONE

Serial Number: _____

TAG DESTROYED

Meter Number Associated with above Backflow Preventor: _____

73124115

Tested by (Firm Name): _____

CME MGT, INC / FRANCIS SAPIENZA

Business Address: _____

Street: _____

City, State, Zip _____

Telephone No. _____

Date of Initial Test: _____

2-2-18

Passed: _____

Failed: ☒

Date of Retest: _____

I certify that I have tested the above assembly and that it meets the performance requirements


 (Signature of Licensed Tester)

 ASSE # 30207
 (License Number of Tester)

Line Pressure at Time of Test _____ psi

	CHECK VALVE 1	CHECK VALVE 2	DIFFERENTIAL PRESSURE RELIEF VALVE
Initial Test	1. Leaked _____ 2. Closed Tight _____	1. Leaked <input checked="" type="checkbox"/> 2. Closed Tight _____	1. Opened at _____ 2. Did not Open _____
R	Cleaned: _____	Cleaned: _____	Cleaned: _____
E	Replaced: _____	Replaced: _____	Replaced: _____
P	Disc _____	Disc _____	Disc _____
A	Spring _____	Spring _____	Spring _____
I	Guide _____	Guide _____	Guide _____
R	Pin Retainer _____	Pin Retainer _____	Pin Retainer _____
S	Hinge Pin _____	Hinge Pin _____	Hinge Pin _____
	Seat _____	Seat _____	Seat _____
	Diaphragm _____	Diaphragm _____	Diaphragm _____
	Other, describe _____	Other, describe _____	Other, describe _____
Final Test	RP _____ Closed Tight _____	Closed Tight _____	Open at _____ reduced pressure

Remarks: _____

 UNIT NEEDS #2 SHUTOFF REPLACED - TOO OLD TO GET PARTS,
 * WHOLE UNIT NEEDS REPLACED!