



BACKFLOW PREVENTION ASSEMBLY TEST REPORT

Name of Premise: _____

Street Address: _____

Location of Assembly: _____

Equipment or Zone Isolated: _____

Assembly: _____
Manufacturer (make) _____ Model _____ Serial No. _____ Size _____
Existing: _____ Replacement: _____ Serial No. of old assembly replaced: _____ New: _____

Type of Assembly: RPBA _____ RPDA _____ DCVA _____ DCDA _____ PVBA _____ AG _____

Line Pressure at Time of Test: _____ psi Testing Equip.: DIF _____ DUP _____ S. T. _____

Calibration Date of Testing Equipment: _____ Calibrated By: _____

	REDUCED PRESSURE ASSEMBLIES				PRESSURE VACUUM BREAKER	
	DOUBLE CHECK ASSEMBLIES		Relief Valve (B)	Buffer (A-B=C) (C)	AIR INLET	CHECK VALVE
	1 ST check ____.____psid	2 ND check ____.____psid			Opened at ____.____psid	Pressure Drop ____.____psid
INITIAL TEST	Closed tight _____ leaked _____ Confirmation test Yes _____ No _____ (A) RP actual Pres. drop ____.____psid	Closed tight _____ leaked _____ Confirmation test Yes _____ No _____	(B) Opened at ____.____psid	(C) ____.____psid	Did not open Yes _____ No _____	Leaked Yes _____ No _____
TEST AFTER REPAIR	DCVA _____.____psid Closed tight _____ Confirmation test Yes _____ No _____ (A) RP actual _____.____ Pres. drop ____psid	DCVA _____.____psid Closed tight _____ Confirmation test Yes _____ No _____	(B) Opened at ____.____psid	(C) ____.____psid	Opened at ____.____psid	Pressure Drop ____.____psid

Air Gap Inspection: Required minimum air gap separation provided: YES _____ NO _____

Test Performed By: _____ Cert No. _____ Test Date _____
YY / MM / DD

Business Name: _____

Business Address: _____

Business Phone: _____

Business Licence No.: _____

I certify that I have tested the above assembly and that it meets the performance requirements outlined in the applicable article of the current B.C. Plumbing Code.

Tester's Signature

Owner's Representative Signature

(Complete reverse if assembly fails initial test)

Email to: BackflowTestReport@abbotsford.ca

Test Results

Pass: _____

Fail: _____

**CHECK CAUSES FOR BACKFLOW PREVENTOR
FAILING INITIAL TEST**

		No. 1 Check Valve	No. 2 Check Valve	Relief Valve
1	Isolating Gate Valve(s) Passing Water			
2	Foreign Matter Introduced During Construction			
3	Sand or Grit Inherent to the Supply System			
4	Copper Filings Solder or Pipe Dope			
5	Nuts Bolts Washers Etc (not from Assembly)			
6	Paper Cardboard or Sawdust			
7	Improper Assembly Installed			
8	Kinking of External Sensing Line	N/A	N/A	
9	Air Entrapment			
10	Turbulence or Rust			
11	Frozen Assembly			
12	Abnormal Rubber Disc Wear or Cuts			
13	Spring(s)			
14	O-ring(s)			
15	Loss of Interior Coating			
16	Disc Retainer (Fractured or Worn)			
17	Retainer Nut			
18	Improper Casting or Machining of Assembly			
19	Guide Mechanism			
20	Obstructed Sensing Line	N/A	N/A	
21	Diaphragm Failure	N/A	N/A	
22	Replace Rubber Parts			
23	Test Cock(s) Missing from Assembly			N/A
24	Improper (Unapproved) Installation			
25	Assembly no Longer Required			
26	Assembly Replaced			
27	Couldn't Test Explain Below			
28	Vertical Installation yes () no ()	N/A	N/A	N/A
29	Other (specify)			
Remarks:				

Copy 1 – Tester

Copy 2 – Owner/Customer

Copy 3 – Building Dept/Plumbing Inspector