



BACKFLOW PREVENTION ASSEMBLY TEST REPORT

Spokane County Water District No. 3

Assembly ID		Facility Name			
Acct Number		Meter #		Test Report Due:	
Service Address				Schedule Code	
Service Address, line 2				Assembly Info (Replacement/Correction)	
Equip Location				SN ☐ correction	
Location ID		Containment		Mfr ☐ correction	
Contact Name		Ph		Type ☐ correction	
Map Page		Phone #2		Size ☐ correction	
				Model ☐ correction	
				Install Date	
				Permit Num	
☐ Confinement	☐ Freeze Protect	Hazard Type		Haz. Level	

Line pressure at time of test: _____

REPORT OF TEST RESULTS

☐ Approved BFP

Test	Check Valve #1	Check Valve #2	Relief Valve	PVB/SVB	Shut Off Valves
Initial Test Pass Fail	☐ Held at _____ PSID ☐ Closed Tight ☐ Leaked	☐ Held at _____ PSID ☐ Closed Tight ☐ Leaked	☐ Opened at _____ PSID ☐ Did Not Open	☐ Air Inlet Opened at _____ PSID Opened Fully Y ☐ N ☐ ☐ Check Held at _____ PSID ☐ Leaked	Closed Tight #1 ☐ #2 ☐ Leaked #1 ☐ #2 ☐
Repair	☐ CLEANED ☐ REPLACED ☐ Disc ☐ Spring ☐ Guide ☐ Seat ☐ O-Ring(s) ☐ Module ☐ Rubber Kit ☐ Other	☐ CLEANED ☐ REPLACED ☐ Disc ☐ Spring ☐ Guide ☐ Seat ☐ O-Ring(s) ☐ Module ☐ Rubber Kit ☐ Other	☐ CLEANED ☐ REPLACED ☐ Disc ☐ Spring ☐ Diaphragm ☐ Seat ☐ O-Ring(s) ☐ Module ☐ Rubber Kit ☐ Other	☐ CLEANED ☐ REPLACED ☐ Air Inlet Disc ☐ Air Inlet Spring ☐ Check Disc ☐ Check Spring ☐ Float ☐ Diaphragm ☐ Rubber Kit ☐ Other	CLEANED #1 ☐ #2 ☐ REPLACED #1 ☐ #2 ☐ REPAIR #1 ☐ #2 ☐ Other #1 ☐ #2 ☐
Notes	Other/Notes:				
Final Test	_____ PSID ☐ Closed Tight	_____ PSID ☐ Closed Tight	☐ Opened at _____ PSID	Opened Fully Y ☐ N ☐ Air Inlet _____ PSID CK Valve _____ PSID	Closed Tight #1 ☐ #2 ☐ Pass ☐

Tested by	Certificate	Test Date	Gauge Num	Time In	Time Out	Company	Phone
Initial Test By							
Final Test By							
Repair By							

The Above Report Is Certified To Be True:
SCWD#3, 1225 N Yardley St, Spokane Valley, WA, 99212 - 509-536-0121