Saluda Commission of Public Works

PO Box 686 / 203 Greenwood Hwy Saluda, South Carolina 29138 864-445-2090

Backflow Device Test Report Form

Circle One	Date:	.						
Meter Number:	Account	t Name/Busi	ness Nam	e:				
Device Number:	Account	t Address:						
Serial Number:	Account Number:					Meter Number:		
Device Location: Tested by (PRINT): Check No. 1 Check No. 2 Air Inlet Valve or Ball (Circle One) Relief Valve Test (Mark One) Before Leaked Differential Closed Tight Diff Press Repairs and New Diff Press Test Diff Press Air Inlet Valve #1 Gate or Ball (Circle One) #2 Gate or Ball (Circle One) #2 Gate or Ball (Circle One) #3 Gate or Ball (Circle One) #4 Gate or Ball (Circle One) #4 Gate or Ball (Circle One) #4 Gate or Ball (Circle One) #5 Gate or Ball (Circle One) #6 Gircle One) #6 Gate or Ball (Circle One) #6 Gircle One) #6 Gate or Ball (Circle One) #6 Gircle One) #6 Gate or Ball (Circle One) #6 Gircle One) #6 Gate or Ball (Circle One) #6 Gircle One) #6	Device Number:					Model Number;		
Tested by (PRINT): Check No. 1 Check No. 2 Air Inlet Valve or Relief Valve Relief Valve Test (Mark One) Leaked Leaked Leaked Differential Closed Tight Diff Press Repairs and New Door (Direction or Relief Valve) Air Inlet Valve #1 Gate or Ball (Circle One) (Mark One) (Mark One) Leaked Leaked Clorel (Circle One) #2 Gate or Ball (Circle One) #2 Gate or Ball (Circle One) #3 Gate or Ball (Circle One) #4 Gate or Ball (Circle One) #5 Gate or Ball (Circle One) #6 Gate or Ball (C	Serial Number:					Size:		
Check No. 1 Check No. 2 Air Inlet Valve or (Circle One) Relief Valve Test (Mark One) Leaked Dened at Ibs. Leaked Leaked Leaked Leaked Closed Tight Tight Diff Press Diff Pre	Device 1	Location:	*					Calcinos (Ch.
Circle One	Tested I	by (PRINT):						
Before Repairs Leaked		Check	No. 1	Check	No. 2	or		#2 Gate or Ball (Circle One)
Repairs and New	Before	Leaked Closed Tight		Leaked Closed Tight		Opened at lbs. Differential	Leaked	Leaked
	and New		=	Dill Fless				
Repairs Closed Closed Differential Closed Closed	After	Leaked Closed Tight		Leaked Closed Tight		lbs. Differential	Leaked	Leaked
Above data certified to be correct.		data certified	to be corr					
	Tester Signature:							
Company Name: Company Telephone Number:								
Category: General Limited Inspector Tester	Category: General					Limited Inspector Tester		
Method of Testing: Test Kit Used:	Method of Testing:					Test Kit Used:		
Comments:	Comme	ents:						