



Village of Mount Prospect Public Works Department
1700 West Central Road, Mount Prospect, Illinois 60056-2229

BACKFLOW ASSEMBLY TEST AND CERTIFICATION REPORT

ADDRESS: _____

TEST DATE: _____

RETEST DATE: _____

SERIAL #	MAKE AND MODEL	SIZE	SERVICE	LOCATION
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	CHECK VALVE #1	CHECK VALVE #2	RELIEF VALVE
INITIAL TEST	HELD AT <input type="text" value="PSID"/>	HELD AT <input type="text" value="PSID"/>	OPENED AT <input type="text" value="PSID"/>
	LEAKED	LEAKED	DID NOT OPEN
	CLOSED TIGHT	CLOSED TIGHT	
FINAL TEST	CLOSED TIGHT	CLOSED TIGHT	OPENED AT <input type="text" value="PSID"/>
	CLEANED	CLEANED	CLEANED
REPAIRS	REPLACED:	REPLACED:	REPLACED:
	DISC	DISC	DISC
	SPRING	SPRING	SPRING
	GUIDE	GUIDE	DIAPHRAGM
	PIN RETAINER	PIN RETAINER	SEAT
	HINGE PIN	HINGE PIN	SPACER
	SEAT	SEAT	
DIAPHRAGM	DIAPHRAGM		
RESULT	COMMENTS: _____		
	PASS	_____	
	FAIL	_____	

COMPANY: _____ FINAL TEST BY: _____ (PRINT)

CCCDI#: XC _____ PLUMBING LICENSE #: _____ SIGNATURE OF TESTER: _____

TEST KIT: _____ CALIBRATION DATE: _____ SUPPLY PSI: _____