

## Annual Backflow Prevention Assembly Test Report

(Note: A separate report is required for each EXISTING BFP assembly)

### Organization Contact Info (please correct or add missing information)

Organization	Contact Person Name	Phone #
Contact Mailing Address (Unit No, Street No, Street Name, City, Postal Code)		
Contact Email Address		

### Facility Info (please correct or add missing information)

Facility Name (Actual name of building/structure of installed device)	Contact Person Name	Phone #
Facility Address (if different than mailing address)		

### BFP Assembly Info (please correct or add missing information)

Assembly Make	Assembly Model #	Assembly Serial #	Assembly Size	Assembly Type
Location of Assembly			Device Orientation (HorV)	Line Pressure (psi)
Process Hazard Type - (what is it protecting?)				

### Initial BFP Test Results (BFP Tester - record tests BEFORE repairs have been made)

<input type="radio"/> RPBA or <input type="radio"/> RPDA	<b>Check Valve #1</b> RP Pressure Drop (A) _____psid <input type="radio"/> Closed tight <input type="radio"/> Leaked	<b>Check Valve #2</b> <input type="radio"/> Closed tight <input type="radio"/> Leaked	<b>Relief Valve</b> Opened at (B) _____psid <input type="radio"/> Passed <input type="radio"/> Failed	<b>Buffer</b> A - B = Buffer _____psid <input type="radio"/> Passed <input type="radio"/> Failed
Air Gap		Required minimum air gap separation provided for RP?		<input type="radio"/> YES <input type="radio"/> NO
<input type="radio"/> DCVA or <input type="radio"/> DCDA	<b>Check Valve #1</b> <input type="radio"/> Closed tight _____psid <input type="radio"/> Leaked	<b>Check Valve #2</b> <input type="radio"/> Closed tight _____psid <input type="radio"/> Leaked	<b>Sight Tube</b> <input type="radio"/> Closed tight <input type="radio"/> Confirmation <input type="radio"/> Leaked	
<input type="radio"/> PVBA	<b>Air Inlet Valve</b> Opened at _____psid	<input type="radio"/> Opened Fully <input type="radio"/> Passed <input type="radio"/> Failed	<b>Check Valve</b> Closed at _____psid <input type="radio"/> Passed <input type="radio"/> Failed	

### Certified BFP Tester Info

Tester's Name (please print)	Tester's Cert. No	Company Name	Tester's Phone #
Test Guage Make	Test Guage Model #	Test Guage Serial #	Calibration Date
			Calibrated By

**Tester's Certification: *I certify that I have tested the above assembly and that it meets the performance requirements outlined in the current edition of the BC Building Code and Canadian Standards Association - CAN/CSA B64.10***

\_\_\_\_\_  
Date Test Completed (mon-dd-yyyy)

\_\_\_\_\_  
Owner's or Representative Name (please print)

\_\_\_\_\_  
Tester's Signature

\_\_\_\_\_  
Owner's or Representative Signature

x COMPLETED report to:

City of Prince George - Utilities Division  
1100 Patricia Blvd  
Prince George, BC V2L 3V9 250-561-7550  
or email to: [aaron.white@princegeorge.ca](mailto:aaron.white@princegeorge.ca)  
Doc#10416\_v1

"I/We understand that the personal information on this form is collected under the authority of the Community Charter, Local Government Act and the City of Prince George's bylaws for the purpose of processing this application and for administration and enforcement. In accordance with the Freedom of Information and Privacy Act, this applications and associated documentation may become part of a public record.

### Backflow Prevention Assembly REPAIR Test Report

(Note: Complete and return this page only if repair or replacement is required)

Assembly Status:     REPAIR                     REPLACING DEVICE # \_\_\_\_\_

Assembly Make	Assembly Model #	Assembly Serial #	Assembly Size	Assembly Type
<input type="radio"/> RPBA or <input type="radio"/> RPDA	<b>Check Valve #1</b> RP Pressure Drop (A) _____psid <input type="radio"/> Closed tight <input type="radio"/> Leaked	<b>Check Valve #2</b> <input type="radio"/> Closed tight <input type="radio"/> Leaked	<b>Relief Valve</b> Opened at (B) _____psid <input type="radio"/> Passed <input type="radio"/> Failed	<b>Buffer</b> A - B = Buffer _____psid <input type="radio"/> Passed <input type="radio"/> Failed
FINAL TEST (if required)	<input type="radio"/> Closed tight	<input type="radio"/> Closed tight	_____psid	_____psid
Air Gap		Required minimum air gap separation provided for RP?		<input type="radio"/> YES <input type="radio"/> NO
<input type="radio"/> DCVA or <input type="radio"/> DCDA	<b>Check Valve #1</b> <input type="radio"/> Closed tight _____psid <input type="radio"/> Leaked	<b>Check Valve #2</b> <input type="radio"/> Closed tight _____psid <input type="radio"/> Leaked	<b>Sight Tube</b> <input type="radio"/> Closed tight <input type="radio"/> Confirmation <input type="radio"/> Leaked	
<input type="radio"/> PVBA	<b>Air Inlet Valve</b> Opened at _____psid	<input type="radio"/> Opened Fully <input type="radio"/> Passed <input type="radio"/> Failed	<b>Check Valve</b> Closed at _____psid	<input type="radio"/> Passed <input type="radio"/> Failed

#### Cause of BFP Assembly Failing Initial Test

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>1. Isolation gate valve(s) passing water</li> <li>2. Foreign matter introduced during construction</li> <li>3. Sand or grit inherent to the supply system</li> <li>4. Copper filings, solder or pipe dope</li> <li>5. Nuts, bolts, washers, etc (not from assembly)</li> <li>6. Paper, cardboard, or sawdust</li> <li>7. Improper assembly installed</li> <li>8. Kinking of external line</li> <li>9. Air entrapment</li> <li>10. Tuberculation or rust</li> <li>11. Frozen assembly</li> <li>12. Abnormal rubber disc wear or cuts</li> <li>13. Spring(s)</li> <li>14. O-ring(s)</li> <li>15. Loss of interior coating</li> </ol> | <ol style="list-style-type: none"> <li>16. Disc retainer (fractured or worn)</li> <li>17. Retainer nut</li> <li>18. Improper casting or machining of assembly</li> <li>19. Guide Mechanism</li> <li>20. Obstructed sending line</li> <li>21. Diaphragm failure</li> <li>22. Replace rubber parts</li> <li>23. Test cock(s) missing from assembly</li> <li>24. Improper (unapproved) installation</li> <li>25. Assembly no longer required</li> <li>26. Assembly replaced</li> <li>27. Couldn't test (explain below)</li> <li>28. Vertical installation    <input type="radio"/> yes    <input type="radio"/> no</li> <li>29. Other (explain below)</li> </ol> |
|---|---|

Remarks: \_\_\_\_\_

Certified BFP Tester Info				
Tester's Name (please print)		Tester's Cert. No	Company Name	Tester's Phone #
Test Guage Make	Test Guage Model #	Test Guage Serial #	Calibration Date	Calibrated By

Tester's Certification: ***I certify that I have tested the above assembly and that it meets the performance requirements outlined in the current edition of the BC Building Code and Canadian Standards Association - CAN/CSA B64.10***

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Date Test Completed (mon-dd-yyyy)

\_\_\_\_\_  
Owner's or Representative Name (please print)

\_\_\_\_\_  
Tester's Signature

\_\_\_\_\_  
Owner's or Representative Signature