

Nebraska Rural Water Association MUST BE TYPED OR COMPLETED IN INK	DOUBLE CHECK VALVE TEST REPORT
--	---

Name of Premises (Company, Person, etc.) _____

Service Address _____	City _____	State _____	Zip _____
-----------------------	------------	-------------	-----------

Mailing Address (If different from above) _____	City _____	State _____	Zip _____
---	------------	-------------	-----------

Location of Device _____

Device Type _____	Manufacturer _____	Serial No. _____	Model No. _____	Size _____
-------------------	--------------------	------------------	-----------------	------------

Substance or Use for Which Device is Installed _____

Line Pressure at Time of Test (at inlet test cock) _____ PSI

INITIAL TEST	Check Valves		Date Installed	Shut-Off Valve	
		# 1	# 2		#2
	Spring loading	_____	_____		_____
	1. Leaked	<input type="checkbox"/>	<input type="checkbox"/>	1. Leaked	<input type="checkbox"/>
	2. Closed Tight	<input type="checkbox"/>	<input type="checkbox"/>	2. Closed Tight	<input type="checkbox"/>

Describe Repairs Necessary to Return Device to Proper Operating Condition (Cleaning is a Repair)

NOTE: Fill in Only if Device Requires Maintenance

FINAL TEST		#1	#2		#2
	Spring loading	_____	_____		_____
	Closed Tight	<input type="checkbox"/>	<input type="checkbox"/>	Closed Tight	<input type="checkbox"/>

Remarks:

This is to verify that the tester arrived at _____ a.m. / p.m.
 and completed work at _____ a.m. / p.m.
 By: _____
 Owner's Representative

Backflow Tester Information

Make: _____ Model: _____
 Serial No.: _____ Date Last Certified: _____

Initial test performed by: (Print) _____ (Signature) _____	Company _____	Cert No. _____ Expiration Date _____	Date of Testing _____
--	---------------	---	-----------------------

Repaired by: (Print) _____ (Signature) _____	Company _____	Cert No. _____ Expiration Date _____	Date of Repair _____
--	---------------	---	----------------------

Final test performed by: (Print) _____ (Signature) _____	Company _____	Cert No. _____ Expiration Date _____	Date of Testing _____
--	---------------	---	-----------------------