



City of Brentwood

ANNUAL BACKFLOW TEST REPORT

PHONE: 615-371-0080

MAILING: 1750 General George Patton Dr
BRENTWOOD, TN 37027

ID: BF _____
FOR OFFICE USE ONLY

DATE _____

BRENTWOOD WATER SERVICES CROSS CONNECTION CONTROL

Street Address _____

Location of Assembly _____

Check One: Irrigation Fire Domestic

Type (RP or DC) _____ Size _____

Manufacturer _____ Model _____

Serial Number _____

Name of Premises _____

Telephone Number _____

Mailing Address _____

Subdivision _____

REDUCED PRESSURE TEST

Relief Valve Opening Point

Opened at _____ PSID
Failed to open

Check Valve #2 Backpressure

Closed Tight
Leaked

#1 Check in Direction of Flow

Held at _____ PSID
Leaked

#2 Shutoff Valve

Held Tight
Leaked

Drop Across # 2 Check Valve

Closed at _____ PSID
Leaked

DOUBLE CHECK TEST

Check #1 in Direction of Flow

Held at _____ PSID
Leaked and Failed

Check #2 Backpressure

Closed Tight
Leaked

#2 Shutoff Valve

Held Tight
Leaked

Drop Across #2 Check Valve

Closed at _____ PSID
Leaked

TEST RESULTS— CHECK ONE

PASS

FAIL

UNABLE TO TEST

Comments:

RETEST

Repaired Replaced

If assembly replaced, list old assembly
data:

Manufacturer _____

Model _____

S/N _____

Testing Company Name _____

Inspector (Print) _____ Phone # _____

Inspector TN Certification # _____ Expires _____

Test Kit Serial # _____ Kit Expires _____

* Signature _____ Date _____

*Contractor, in response to solicitation for services to be performed has in a good and skillful manner, completed performance in accordance to the guidelines provided by the Tennessee Department of Environment and Conservation, and hereby warrants the complete and conforming performance of services rendered.

ORIGINAL SIGNED COPY TO CITY OF BRENTWOOD