



City of Covina Public Works Water Division

534 N. Barranca Ave. Covina, California 91723

Backflow Prevention Device Field Testing and Maintenance Report

Preventative Public Health Environmental Management

Manufacturer:

Model:

Size:

Serial Number:

Location:

DUE:

	Check Valve #1	Check Valve #2	Differential Pressure Relief Valve	Air Inlet Valve
Initial Test	Closed Tight _____ Leaked _____	Closed Tight _____ Leaked _____	Opened at _____ lbs. Opened under 2 # or did not open _____	Opened at _____ lbs. Opened under 1 # or did not open _____
	Cleaned _____ Replaced: Disc _____ Spring _____ Guide _____ Hinge Pin _____ Seat _____ Diaphragm _____ Module _____ Other _____ Describe: _____	Cleaned _____ Replaced: Disc _____ Spring _____ Guide _____ Hinge Pin _____ Seat _____ Diaphragm _____ Module _____ Other _____ Describe: _____	Cleaned _____ Replaced: Disc _____ Spring _____ Guide _____ Hinge Pin _____ Seat(s) _____ Diaphragm _____ Module _____ Other _____ Describe: _____	Cleaned _____ Replaced: Disc _____ Spring _____ Diaphragm _____ Float _____ Other _____ Describe: _____
Repairs				
Final Test	Closed Tight _____	Closed Tight _____	Opened at _____ lbs.	Opened at _____ lbs.

THE ABOVE REPORT IS CERTIFIED TO BE TRUE.

Initial Test By (Signature) _____

Tester Number _____

Initial Test Date _____

Repaired By _____

Repair Date _____

Final Test By (Signature) _____

Tester Number _____

Final Test Date _____

If you have any questions or THERE IS A CHANGE IN OWNERSHIP, ADDRESS, DEVICE LOCATION OR A DEVICE IS REMOVED, PLEASE CONTACT THE WATER DEPARTMENT AT (626) 384-5234.