# South Camden Water & Sewer District

## Backflow Prevention Assembly Test & Maintenance Form

**Owner of Property**

**Mailing Address**

**Return Form By:**

**Test Date**

- [ ] RP - ASSE #1013
- [ ] RPDA - ASSE #1047
- [ ] DC - ASSE #1015
- [ ] DCDA - ASSE #1048
- [ ] PVB - ASSE #1020
- [ ] SRVB - ASSE #1056

**Contact Person**

**Assembly Address**

**Permit Number**

**Make**

**Model No.**

**Test Type**

**Gauge Ser. No.**

**Testing Firm**

**Tester Name**

**Tester Certification No.**

**Line PSI**

<table>
<thead>
<tr>
<th>Reduced Pressure Backflow Preventer</th>
<th>Pressure Vacuum Breaker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Double Check Valve Assembly</td>
<td>Spill Resistant Vacuum Breaker</td>
</tr>
<tr>
<td>Check Valve No. 1</td>
<td>Check Valve</td>
</tr>
<tr>
<td>Check Valve No. 2</td>
<td>Air Inlet</td>
</tr>
<tr>
<td>Relief Valve</td>
<td></td>
</tr>
<tr>
<td>Opened at</td>
<td>Closed Tight</td>
</tr>
<tr>
<td>Did Not Open</td>
<td>PSID</td>
</tr>
<tr>
<td>_______ PSID</td>
<td></td>
</tr>
<tr>
<td>Closed Tight</td>
<td>PSID</td>
</tr>
<tr>
<td>Opened at</td>
<td></td>
</tr>
<tr>
<td>Leaked</td>
<td></td>
</tr>
<tr>
<td>Did Not Open</td>
<td></td>
</tr>
<tr>
<td>_______ PSID</td>
<td></td>
</tr>
</tbody>
</table>

**Initial Test**

- [ ] PASS
- [ ] FAIL

**Final Test**

- [ ] PASS

**Condition of No. 2 Shutoff Valve:**

- [ ] Closed Tight
- [ ] Leaked

**Water Service Restored**

- [ ] Yes
- [ ] No

**Notes:**

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**Certification:** On this date, the above device was tested per applicable codes and the required performance standards.

**Test Type**

**Gauge Ser. No.**

**Testing Firm**

**Tester Name**

**Tester Certification No.**

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**Tester Signature:**

**Date:**

**Contact Signature:**

**Date:**