

Appendix O3 Double Check Valve

BACKFLOW PREVENTION DEVICE TEST CERTIFICATE
DOUBLE CHECK VALVE (DCV)

Use Tab to move to next field

Building Details:

Building name:

Block / level / unit number:

*Street address:

Suburb:

Compliance Schedule. No.:

Water meter number:

Owner:

*Name:

Contact person:

*Address:

Phone number:

Occupier:

Business name:

*Contact person:

Type of business:

*Phone number:

Device Details:

Protection: Individual source Zone Boundary

Location:

Manufacturer: <input type="text"/>	Serial No.: <input type="text"/>
Model: <input type="text"/>	Nominal Size: <input type="text"/> mm
Installation correct: Yes <input type="checkbox"/> No <input type="checkbox"/>	Strainer installed: Yes <input type="checkbox"/> No <input type="checkbox"/>

Comments on installation:

Test Details:

Test kit serial number.: Calibration date:

	First check valve	Second check valve	Downstream isolating valve
Initial test:	tight <input type="checkbox"/> leaked <input type="checkbox"/>	tight <input type="checkbox"/> leaked <input type="checkbox"/>	tight <input type="checkbox"/> leaked <input type="checkbox"/>
Pressure reading:	kPa <input type="text"/>	kPa <input type="text"/>	
Test after repairs:	tight <input type="checkbox"/> leaked <input type="checkbox"/>	tight <input type="checkbox"/> leaked <input type="checkbox"/>	tight <input type="checkbox"/> leaked <input type="checkbox"/>
Pressure reading:	kPa <input type="text"/>	kPa <input type="text"/>	

Repairs and materials used (if applicable):

Comments:

Test Result:

Pass Fail

Test method:

Tester Details:

Name of tester: <input type="text"/>	Company name: <input type="text"/>
IQP No: <input type="text"/>	Company address: <input type="text"/>
Signature: <input type="text"/>	
Date of test: <input type="text"/>	

NOTE: This test report only constitutes an assessment of existing devices and does not mean ALL cross connections on the site have been addressed. Neither does it mean the existing devices are appropriate for the hazard. This must be addressed by an IQP (Survey). Cross connections are a major PUBLIC HEALTH RISK and are the owner's responsibility to ensure they are addressed.

* required entry