



ANNUAL TEST & MAINTENANCE REPORT FOR BACKFLOW PREVENTION DEVICES

City of Fairfield, Public Utilities Department, Water Division
(513) 858-7775

Device Address: _____ Business Name: _____

CONTACT INFORMATION

Contact Name/Owner: _____ Phone: _____

Mailing Address: _____ City, State, & ZIP: _____

E-mail: _____

BACKFLOW TEST INFORMATION

TYPE: _____ MFR.: _____ MODEL: _____ SERIAL NO.: _____ SIZE: _____

EQUIPMENT LOCATION IN FACILITY: _____

TEST DATE: _____ CONTAINMENT* ☐ INITIAL TEST ☐ RETEST ☐

***Containment Devices ONLY.** Isolation Device Reports should be sent to the Butler County Health Dept.

WATER SUPPLIER: City of Fairfield Water Division

SUPPLY PSI: _____

	WHEEL VALVES	CHECK VALVE #1	CHECK VALVE #2	RELIEF VALVE
TEST BEFORE REPAIR	LEAKED <input type="checkbox"/> CLOSED TIGHT <input type="checkbox"/>	LEAKED <input type="checkbox"/> CLOSED TIGHT <input type="checkbox"/>	LEAKED <input type="checkbox"/> CLOSED TIGHT <input type="checkbox"/>	OPENED AT _____ PSI REDUCED PRESSURE
DESCRIBE REPAIR _____				
FINAL TEST			CLOSED TIGHT <input type="checkbox"/>	OPENED AT _____ PSI REDUCED PRESSURE

CERTIFICATION (TESTER)

I hereby certify the above data to be correct and that the above BFP device is in the proper operating condition.

Tester (print): _____ State of Ohio Cert. No. _____

Tester (signature): _____ Date: _____ Phone #: _____

Address, City, State, & ZIP: _____

CERTIFICATION (BUILDING OWNER OR AGENT)

I hereby certify that the above backflow prevention device has been in constant use at this location during the entire prescribed interval between test periods and during that period this device was not by-passed, made inoperative, or removed without proper authorization. All defects found during the operation period or during testing of device were satisfactorily corrected without delay. I further certify that I have the responsibility and authority to insure the above.

Owner/Agent (print): _____ Title: _____

Owner/Agent (signature): _____ Date: _____

Mail to: City of Fairfield Water Division
5021 Groh Lane
Fairfield, OH 45014

Fax to: (513) 829-3536

E-mail to: public_utilities@fairfield-city.org