



District of Columbia Water & Sewer Authority

Submit to: DC Water Permit Operations
 1100 4th Street SW, Suite 310
 Washington, DC 20024

Backflow Prevention Assembly (BPA) Inspection Report
FOR
FIRE HYDRANT USE ONLY

Make _____ Model _____ Size _____ Serial Number _____

Hydrant location: _____

Test Results	Reduced Pressure Assembly			
	Relief Vent	1 st Check	2 nd Check	Backsiphonage (optional)
	Opened at _____ Diff psi	Closed Tight at _____ Diff psi Leaked _____	Closed Tight at _____ Diff psi Leaked _____	Closed Tight at _____ Diff psi Leaked _____
Test Conclusion (Circle one):	Pass	Fail		

Test Date _____ Next Test Date _____

Tester Signature _____ certifies the above results are true
 Print Tester Name _____ Certification # _____
 Test Firm Name _____ Test Firm Address _____
 Most recent gauge calibration date _____

Note: All assemblies should be tagged indicating test firm address, test date, tester name and certification number

For any questions or comments contact DC Water at
 202-364-3144
 compliance@dcwater.com