

Control Number: 42954



Item Number: 6

Addendum StartPage: 0

House Bill (HB) 1600 and Senate Bill (SB) 567 83rd Legislature, Regular Session, transferred the functions relating to the economic regulation of water and sewer utilities from the TCEQ to the PUC effective September 1, 2014.

City Of Italy P.O. Box 840 101 Main Street Italy Texas 76651

2014 SEP 25 PM 1: 54 PUBLIC UTILITY COMMISSION FILING CLERK

RECEIVED

Date: April, 11 2014

RE: City Of Italy – TECQ Questions

Att: Crystal Watkins Region 4 Att: Mary Damron TCEQ Austin REGENVED APR 17 2014

UTILITIES & DISTRICTS SECTION

2. Failure to maintain plant Monitoring Plan

The city submitted a Plan of the old system, since then the city has put a new system on line at this time. Please see New Monitoring Plan

3. Failure to maintain backflow prevention test reports

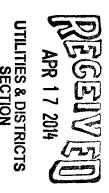
There is a list of the backflow that was submitted to region 4, this list has been up dated. Please see the updated list

- 6. Failure to properly maintain the concrete seal block on well #2 and #3 The city had the concrete well head block rehabbed. Please see the pictures
- 7. Failure to maintain the chlorine room with a upper fan The city has a new chemical building. Please see the pictures
- 9. Failure to maintain grounds

The city has had a new fence put around the property as part of the upgrades to the water system. Please see pictures

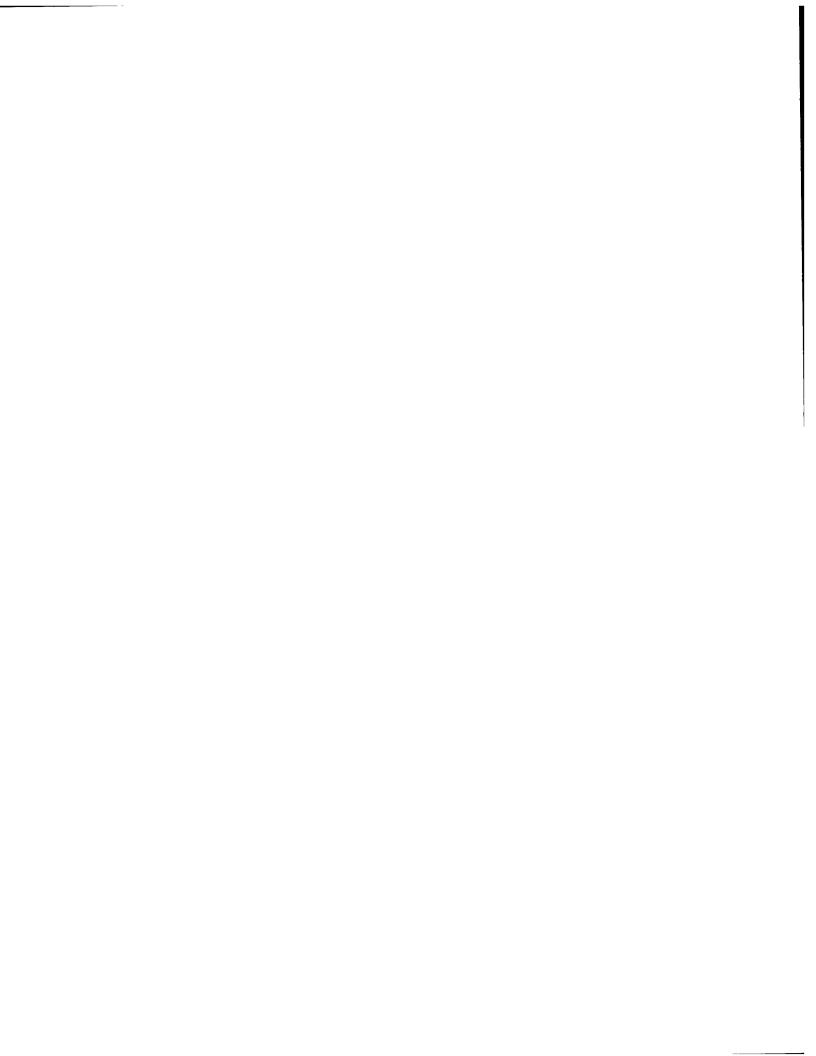
The City of Italy thanks TCEQ for their patients, it has been along two years. This water project was needed and is a great impact to the community. If there is any questions please contact Public Work Director Dean Carrell at (972) 483-7329 City Hall or (972) 483-6212 Public Works.

Carrell CWP and



BACKFLOW DONE	317 POPLAR	IRRIGATION	
BACKFLOW DONE	315 POPLAR	IRRIGATION	32 TATES, BRAD
IRRIGATION REMOVED	400 S WARD	IRRIGATION	
BACKFLOW DONE	217 SEAY RD	IRRIGATION	30 WHITEAKER, CAROLYN
NOT ACTIVE	713 DALLAS	IRRIGATION	29 WEAVER, JIMMY
BACKFLOW DONE	200 W DILWORTH	IRRIGATION	28 UPCHURCH FIELDS
	220 DAVENPORT		27 I RINITY MISSION
	1020 DALE EVANS	RESTRAUNT	26 IEXAS BEST
D INTO WATER SYSTEM-ADVISED TO INSTALL	313 S WARD	IRRIGATION	25 TATUM, BROWDER
	100 LR CAMBELL	RESTRAUNT	
	100 LR CAMPBELL	RESTRAUNT	
BACKFLOW DONF	301 HARRIS		
	100 SIMMS	CAR WASH	
	100 LR CAMPBELL	RESTRAUNT	20 PIZZA INN
	100 LR CAMPBELL	IRRIGATION	19 PIZZA INN
PRESSUREREDUCE VACCUM BREAKER	320 S WARD	IRRIGATION	18 MULLER, KEVIN
BACKFLOW-1" DOUBLECHECK	209 E MAIN	IRRIGATION	1/MILLER, JONATHAN
AVB	913 GENOA	POOL	16 JONES, JERRY BOB
POOL NOT HOOKED INTO WATER SYSTEM-ADVISED TO INSTALL A AID CAD COMMATES INCOME.	901 MARTIN	SWIM POOL	15 JENKINS, DAVID
	300 COLLEGE		14 ITALY HIGH
BACKFLOW-1" DOUBLE CHECK	204 E MAIN	IRRIGATION	1311ALY FAMILY MEDICINE
REDUCE PRESSURE ZONE	501 MOSLEY	CAR WASH	12 HYLES CAR WASH
AVB	801 HWY 667	POOL	TI GOUDWIN, LEE
NOT REQUIRED - ONE BATHROOM	413 W MAIN	IRRIGATION	10 FAMILY DOLLAR
NO REQUIRED-NO SPRINKLER	300 W MAIN		9 DUNLAP LIBRARY
NO REQUIRED-ONE RESTROOM	761 DALE EVANS		
NOT ACTIVE	306 AVALON	IRRIGATION	
PRESSURE VACCUM BREAKER	313 HARPOLD	IRRIGATION	
	SECW		
KEHOUSE-BACKELOW DONE NOT TALV MATER	1020 DALE EVANS		4 CONTRACTOR METER
AVB	717 RHONDA	IRRIGATION	3 CLARK, KENDA
		IRRIGATION	2 CARROLL, CELEST
INTERNAL RPAT	201 E MAIN	LAUNDRAMAT	1 BOUCHARD, KRISTIEN
SECTION	ADDRESS	STORE	NAME

J	NAME	107000			
		STORE	ADDRESS		
V /~	BOUCHARD, KRISTEN		11 RIDGEWOOD DR.]	
	CARROLL, CELEST		904 MARTIN		RECEIVED
	CLARK, KENDA		717 RHONDA		KIGOSUV KIII
	CUNNINGHAM, AMBER	IRRIGATION	313 HARPOLD		APR 1 7 2014
	DAVIS, TOMMY	IRRIGATION	306 AVALON	1	APR 1 / 2014
	DOLLAR GENERAL		761 DALE EVANS	1	UTILITIES & DISTRICTS
	DUNLAP LIBRARY		300 W MAIN	1/	SECTION
	ERWIN, LINDA			1	02011011
	FAMILY DOLLAR	IRRIGATION	413 W MAIN	7~	
· • 🗳	HOASER, HERBERT		123 NELLIE BELL LANE		
	HOOKER, JERRY	OUTOFOL	160 CHAMBERS DR.	1	
	HUGHES, DALE	111	130 CHAMBERS DR.	1	
	HYLES CAR WASH	RECTIONT	1004P OAMPOELL	100 311119	5
	ITALY FAMILY MEDICINE	SPRINK	204 E MAIN		
	ITALY ISD		300,COLLEGE		
			201 E MAIN	1	
	JENKINS, DAVID	SWIM POOL	901 MARTIN	SVA V.	
	MOTT, LISA	OUTOFCITU	1421 CHAMBERS DR.	V AVB	
	MULLER, KEVIN	IRRGIATION	320 S WARD	1	
	NEIL, SANDY			1 1	
F	PIZZA INN	IRRIGATION	100 LR CAMPBELL	V 1.0000	
E	PIZZA INN	RESTRALINT	100 LR CAMPBELL	1000	
F	RUDOLPH, CRAIG		100 SIMMS	1	
S	STAFFORD ELEMENTARY		301 HARRIS	1	
S	TRICKLAND, DONNA		216 CHAMBERS DR.	~ Koeo Bell ~ Koeo Bell ~ X -1	
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	aly Flomentery	301	Harris	4	
	JONES, JEPPY			»	
	GOODWINI LAST	- 8011	1/WY ZG7 POO	L	
	MILLER, SOM	ATHAM	204EMAINI	PEIGATIC	DN



Kevin Muller 320 S Ward Italy, TX 76651-3774

1,106.37

RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEM PER ORDINANCE NO. 10-1108-02

Dear Mr. Muller:

UTILITIES & DISTRICTS

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

According to the Public Works records, this address is required to have a backflow prevention device installed and tested on an annual basis.

Per Ordinance No 10-1108-02 Article II, Section 2.12 Testing of Assemblies (4) It is the responsibility of the property owner and the person in control of the premises to have all backflow prevention assemblies tested in accordance with this ordinance.

Per Ordinance No. 10-1108-02 Article V, Section 5.01 (1) A person who violates any provision of this Ordinance by performing an act prohibited or failing to perform an act required is guilty of a misdemeanor; each day the violation continues shall be a separate offense. Also be advised that the City has the right to suspend service to any premises without prior notice.

This is a service that the City of Italy can provide for a minimal fee of \$75. You may contact the Backflow Assembly Contractor of your choice, however this contractor must register with the City.

Please consider this official notice that the backflow testing requirement is past due and must be submitted to the City no later than February 7, 2013. After this date, further action will be taken by the City, which may include a citation being issued by the code enforcement division.

If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Dean Carrell

Public Works Director

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW	PREVENTION ASS	EMBLY TEST	AND	MAINTENANCE REI	PORT	DE(GEIVE	
NAME OF PW						AF	PR 1 7 2014	
PWS I.D.#	070	0028		<u> </u>		UTILIT	ES & DISTRICT	S
MAILING ADD	RESS:	PO BOX 0840,	ITAL	Y, TX 76651-0840			SECTION	
CONTACT PE		Kpuir	, Y	Nuller				
LOCATION OF		. 320	$\frac{1}{2}$	i Jand	· · · · · · · · · · · · · · · · · · ·			
The backflow p regulations and	prevention assemble is certified to be o	y detailed belov perating within a	v has accep	been tested and mai table parameters.	ntained as req	uired by co	mmission	
г	Reduced Press	uro Dringiale	•	TYPE OF ASSEMBL		•		
Ž	Double Check V	/alve			Reduced F Double Ch	Pressure Pr	rincipal-Detector	
۰ <u>۲</u>] Pressure Vacuu	m Breaker			Spill-Resis	tant Pressu	ire Vacuum Brea	ker
Manufacturer	WIIke	ins		0	ize l	((
Model Number	72	D-A	·····	Located				
Serial Number	-600-	wood			~ <u>F/E</u>	not ife	ard	
is the assembly	installed in accord	ance with monu	faatu	rer recommendations		(
,					s and/or local o	odes?		
	Ri Double Cher	educed Pressure Pre	rincipal	Assembly		Pressure V	acuum Breaker	
	1st Check	2nd Chec		- Defection	Air	Inlet	Check Valv	/e
Initial Test	Held at	Held at	<u> </u>	Relief Valve Opened at	Opened at			
	psid	psid	<u> </u>	peid	- psid -		Held at	./
	Closed Tight	Closed Tight		Did Not Open	Did Not Open		Leaked	
Repairs and								
Materials Used	}				510	an f	n openi	
Test After	Held at	Held at		Onenadat				
Repair	psid	psid		Opened at	Opened at		Held at	
L	Closed Tight	Closed Tight			psid	i	psid	110
Tested gauge use	ed: Make/Model			SN:		Calibra	ation Date 66-0	4 13 84-14
Remarks:	Und to	test	24	mys 40	90/400	work	Hlack	
The above is certi	fied to be true at th	e time of testing	1 <i>04</i> 3.	Her. Cap	L'a Pla	stict	no kan	<u>CCM</u>
Firm Name	(4 dy Df	Ttoly		Certified Tester	Pean	Cas	rell	
Firm Address	413 (10	uk		Cert. Tester No	BP.0	20092	oct	
Firm Phone #	972-483-	6212	I	Date <u>04-12</u>	-14			

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW PI	REVENTION ASSE	MBLY TEST AND	AINTENANCE REPO	RT DRAS	enven
NAME OF PWS		ITALY		REGE	
PWS I.D.#	0700	028		APR 1	7 2014
MAILING ADDR	ESS: <u>P</u>	O BOX 0840, ITALY	, TX 76651-0840	UTILITIES	CTION
CONTACT PER	SON:	Dean	Carrel		
LOCATION OF		CH4 4	ark 200 1	Dillworth	
The backflow pro- regulations and i	evention assembly is certified to be op	detailed below has l erating within accept	been tested and maint	ained as required by co	mmission
		٦	YPE OF ASSEMBLY		
IJ	Reduced Pressu	e Principle	Г	Reduced Pressure Pr	incipal Detector
N N	Double Check Va		Ē	Double Check-Detect	for
	Pressure Vacuun	n Breaker	Ē] Spill-Resistant Pressu	ire Vacuum Breaker
Manufacturer	WATT	5	Siz	a 2."	
Model Number	0071	11-DT	Located A		
Serial Number		9417		"_pust_p	Iela
Is the assembly in	nstalled in accorda	nce with manufactur	er recommendations a	and/or local codes?	
	Rec	luced Pressure Principal	Assembly	Pressure V	acuum Breaker
		Valve Assembly		Air Inlet	Check Valve
Initial Test	1st Check Held at 2, 4/	2nd Check	Relief Valve		
	psid	Held at _2.7	Opened at	Opened at	Held at
	Closed Tight	psid	peid	psid	biaq
		Closed Tight	Did Not Open	Did Not Open	Leaked
Repairs and					
Materials]
Used					1
Test After	Held at	Held at	Opened at	Opened at	Held at
Repair	psid	psid	psid	psid	psid
	Closed Tight	Closed Tight	······		
Tested gauge use	d: Make/Model	WATTS	SN: 117758	Calibr	ation Date: <u>36-05/-</u> 12/
Remarks:	Man				· · · · · · · · · · · · · · · · · · ·
The above is certif	ied to be true at the	time of testing.			
Firm Name	City Df	Ttaly	Certified Tester	Dean (à	well
Firm Address	113.Cl	ark	Cert. Tester No	RP. org	204

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS **USE ONLY MANUFACTURER'S REPLACEMENT PARTS



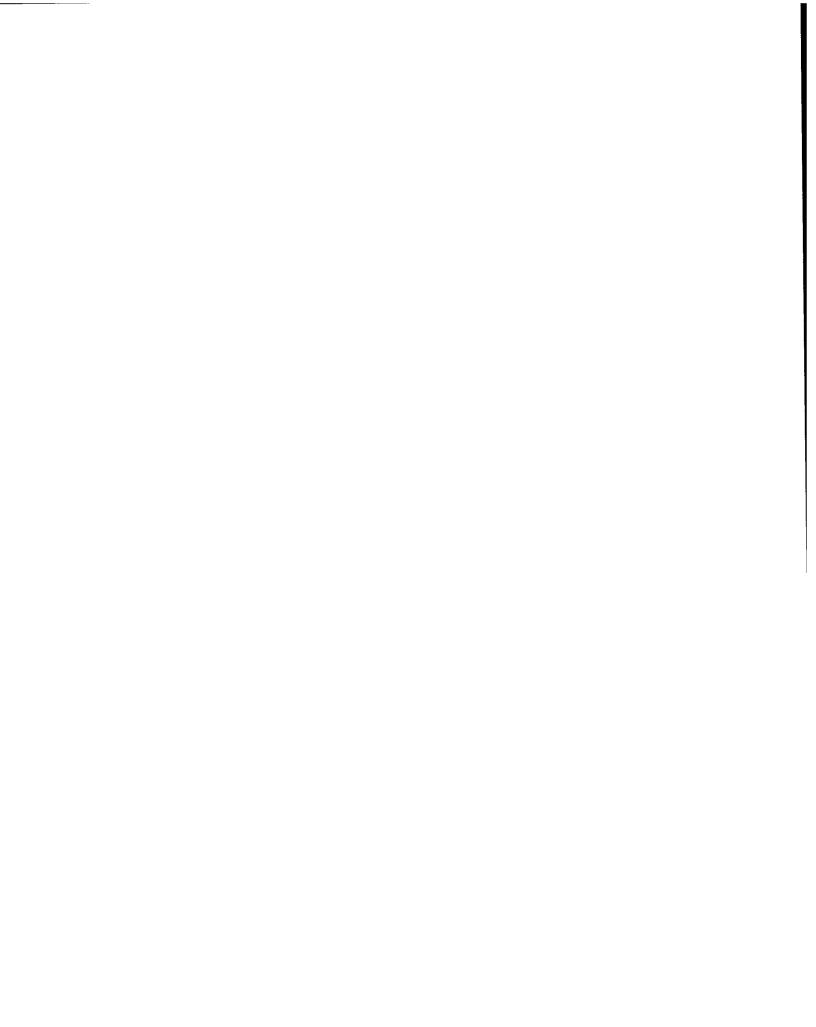
The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

		SEMBLY TEST A	ND MAINTENA	NCE REP	ORT			· ···· / ·····
		OF ITALY				DE	GEUV	
PWS I.D.#		00028				Bac	APR 1 7 2014	4
MAILING ADD	RESS:	PO BOX 0840, IT	ALY, TX 7665	-0840			TIES & DISTI	PICTS
CONTACT PE	RSON:	Cu	nninal	am	Anh		SECTION	
LOCATION OF	SERVICE:		313 4	anpo	Id			
The backflow regulations and	prevention assemb t is certified to be o	ly detailed below I perating within ac	nas been tested ceptable param	and maint eters.	ained as requir	ed by co	mmission	
Г	7 Reduced Bross		TYPE OF A	SEMBLY				
Manufacturer	Reduced Press Double Check \ Pressure Vacuu	/alve] Spill-Resistar	:K-Detec	rincipal-Detect tor tre Vacuum Bi	
Model Number	-Fel	200		Size	314			
Serial Number	 	50 44		Located A	tZ	ront	gard	
Is the assembly	installed in accorda	ance with manufa	cturer recomme	endations a	nd/or local cod	les?		
	R	educed Pressure Princ			T			
	Double Chec 1st Check	k Valve Assembly			Air Inle	Pressure V	acuum Breaker	
Initial Test	Held at 2,7	2nd Check Held at	Relief	Valve		•	Check	/alve
	psid	psid	Opened at		Opened at		Held at	
	Closed Tight	Ciosed Tight	Did Not Open		psid Did Not Open	П	psid Leaked	
Repairs and			┕┛┨╼╼╼╼╼			L		
Materials Used								
Test After	Held at	Held at						
Repair	psid	psid	Opened at psid		Opened at		Heid at	
	Closed Tight	Closed Tight		ľ	psid		psid	
Tested gauge use	d: Make/Model	WATTS	SN: //	7768		1	- Al	4-13
Remarks:	Nea	v aboa	$\overline{\checkmark}$ $1.1.6$	<u> </u>	<u> </u>	Calibra	tion Date:	-14-14
The above is certif	ied to be true at the	e time of testing.				······		
Firm Name	Aypf-	Haly	Certified Test	er	Dean 1	Var		r
— •••••••	1/10 /1	C //				un	reff	
Firm Address	413 [1]	ere l	_Cert. Tester N	×، ما	P. m	うのつぶ	X	
Firm Address	413 [1] 72-483-6	1212	Date 04	10 <u>č</u> 1-17-	<u>P. 000</u> 14	2720	4	

AUB

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW P	REVENTION A	SSEMBLY TEST	AND	MAINTENANCE REPO	DRT T	NG	RENTRES
NAME OF PWS					N	E	OGUV GUU
PWS I.D.#	0	700028		······	-	A	
MAILING ADDR	RESS:	PO BOX 0840, I	TAL	Y, TX 76651-0840	U	TILT	TIES & DISTRICTS SECTION
CONTACT PER	RSON:	Jer	ny	Bob Jo	nes		
LOCATION OF	SERVICE:	<u> </u>	3 (n Joneg			
The backflow pr regulations and	evention assem is certified to be	bly detailed below operating within a	has ccep	been tested and maint table parameters.	ained as required b	y coi	mmission
	Reduced Pres Double Checi Pressure Vac			TYPE OF ASSEMBLY	Reduced Pressur	etect	incipal-Detector tor ire Vacuum Breaker
Manufacturer Model Number Serial Number				Siz	e		
ls the assembly i	nstalled in acco			rer recommendations a	and/or local codes?		
	Double C	Reduced Pressure Pr heck Valve Assembly	incipal	Assembly	Press	ure V	acuum Breaker
······	1st Check	2nd Check	<	Relief Valve	Air Inlet		Check Valve
Initial Test	Held at	Held at		Opened at	Opened at		Held at
	Closed Tight Leaked	Psid Closed Tight		peid Did Not Open	psid Did Not Open		psid Leaked
Repairs and							
Materials Used							
Test After	Held at	Held at		Opened at	Opened at		
Repair	psid Closed Tight	Psid Closed Tight		psid	psid		Held at psid
Tested gauge use	d: Make/Model			SN:	LC	alibra	ation Date:
Remarks:	Nec	v tool		AUB	21	s√	able
The above is certifi	ied to be true at	the time of testing	J.				
Firm Name				Certified Tester			
Firm Address				Cert. Tester No			
Firm Phone #				Date			
* TEST RECORDS MUS	ST BE KEPT FOR	AT LEAST THREE YE	ARS				





AVB

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW PR	REVENTION A	SSEN	BLY TEST	AND N	AINTENANCE REPO	ORT	MB	REN	VIEN
NAME OF PWS		OF I	TALY				NE	Sau -	VISU
PWS I.D.#	(07000	28				A	PR 17-2	014
MAILING ADDR	ESS:	PO	BOX 0840, I	TALY	, TX 76651-0840		UTILI	TIES & DIS	STRICTS
CONTACT PER	SON:		her	. (hadulin		····· ···		
	SERVICE:		80	l t	twp 66-	7			
The backflow pro regulations and i	evention assen s certified to be	nbly d e ope	letailed below rating within a	v has l accept	peen tested and main able parameters.	ained as requir	ed by cor	nmission	
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님	Double Chec Pressure Vac					Double Chec	k-Detect	or	
	Flessule vac	cuum	Breaker		Ľ] Spill-Resista	nt Pressu	re Vacuum	Breaker
Manufacturer					Siz	e			
Model Number									
Serial Number			······						
Is the assembly in	nstalled in acco	ordan	ce with manu	Ifactur	er recommendations	and/or local co	des?		
			uced Pressure P	rincipal	Assembly		Pressure V	acuum Breake	er i
	Double (1st Check		Valve Assembly			Air Ink			eck Valve
Initial Test	Held at		2nd Cheo Held at	ск	Relief Valve Opened at				
	psid		psid		peid	Opened at	- <u></u>	Held at	
	Closed Tight		Closed Tight		Did Not Open	Did Not Open		lpsid Leaked	
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Repairs and Materials	1								
Used									
Test After	Held at		Held at		Opened at	Opened at		Held at	
Repair	psid		psid		psid	psid		psid	
	Closed Tight		Closed Tight			<u> </u>		poid	
Tested gauge use	d: Make/Mode	el .		9	SN:		Calibra	ation Date:	
Remarks:	+ 65 0	2	tofi	<u>// </u>	Tool AVE	<u>B 167</u>	- Te	stabl	1.4
The above is certif	ied to be true a	at the	time of testin	ıg.					
Firm Name					Certified Tester				
Firm Address			·····		Cert. Tester No				
Firm Phone #					Date				•
* TEST RECORDS MU	IST BE KEPT FOI	RATL	EAST THREE Y	EARS			· · · · · · · · · · · · · · · · · · ·		

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Browder Tatum 313 S Ward Italy, TX 76651-3580

Still Mer 181

RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMB PER ORDINANCE NO. 10-1108-02

Dear Mr. Tatum:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to portion the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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Dean Carrell

Public Works Director

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW F	PREVENTION	ASSEMBLY	TEST AN	ID i	MAINTENANCE REPO	DRT I	PORTURA
NAME OF PW	S: <u> </u>	Y OF ITALY	/			R	BREAKELL
PWS I.D.#		0700028		_		(Ju	APR 1 7 2014
MAILING ADD	RESS:	PO BO	(0840, IT/	ALY	, TX 76651-0840	UTI	ITIES & DISTRICTS
CONTACT PE	RSON:		Rio.	>		m	SECTION
LOCATION OF	SERVICE:		217	$\frac{1}{\langle}$	1. David	<u> </u>	
			270	2	wav.u		
regulations and	is certified to t	mbly detail be operating	ed below h I within acc	as cepi	been tested and maint table parameters.	ained as required by co	ommission
-	Deduced D			٦	TYPE OF ASSEMBLY		
	Reduced Pr	essure Prin	ciple			Reduced Pressure P	rincipal-Detector
	Pressure Va		ker		Ļ	J Double Check-Detect	tor
Manufacture					L.,] Spill-Resistant Press	ure Vacuum Breaker
Manufacturer Model Number					Size	e	
Serial Number					Located A	.t	
is the assembly i	installed in acc	ordance wi	th manufac	ctur	er recommendations a	and/or local codes?	
			ressure Princ				
		Check Valve A	ssembly	-pu		Air Inlet	/acuum Breaker
Initial Test	1st Checi Held at	the second se	2nd Check		Relief Valve		Check Valve
	psid	Held a	t		Opened at	Opened at	Held at
	Closed Tight	Closed	l Tight		Did Not Open	psid Did Not Open	psid
Repairs and	Leaked		<u> </u>	$\overline{\Box}$			Leaked
Materials							
Used							
Test After	Held at	Held at			Opened at	Opened at	Held at
Repair	psid Closed Tight			_	psid	psid	psid
		Ciosed	light				
Tested gauge use	d: Make/Mod	el			SN:		ation Date:
Remarks:	li	ater	401	V	1 tose	AVB No	A TESTOBLI
The above is certif	ied to be true a	at the time o	of testing.				
Firm Name				(Certified Tester		
Firm Address				(Cert. Tester No		
Firm Phone # -	······				Date		
TEST RECORDS MU	ST BE KEPT FOR	R AT LEAST T		s			

**USE ONLY MANUFACTURER'S REPLACEMENT PARTS

Tommy Davis PO Box 0882 Italy, TX 76651-0882

206 AVALON



RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSEMBLY PER ORDINANCE NO. 10-1108-02

Dear Mr. Davis:

UTILITIES & DISTRICTS

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

According to the Public Works records, this address is required to have a backflow prevention device installed and tested on an annual basis.

Per Ordinance No 10-1108-02 Article II, Section 2.12 Testing of Assemblies (4) It is the responsibility of the property owner and the person in control of the premises to have all backflow prevention assemblies tested in accordance with this ordinance.

Per Ordinance No. 10-1108-02 Article V, Section 5.01 (1) A person who violates any provision of this Ordinance by performing an act prohibited or failing to perform an act required is guilty of a misdemeanor; each day the violation continues shall be a separate offense. Also be advised that the City has the right to suspend service to any premises without prior notice.

This is a service that the City of Italy can provide for a minimal fee of \$75. You may contact the Backflow Assembly Contractor of your choice, however this contractor must register with the City.

Please consider this official notice that the backflow testing requirement is past due and must be submitted to the City no later than February 7, 2013. After this date, further action will be taken by the City, which may include a citation being issued by the code enforcement division.

If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

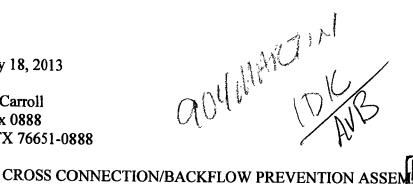
Dean Carrell Public Works Director

The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW P	REVENTION	ASSE	MBLY TEST	AND I		REPO	RT			
NAME OF PWS	S: <u>CIT</u>	OF	ITALY					RE	GEIN	VEIII -
PWS I.D.#		0700	028					U A	APR 17 20	014
MAILING ADDF	RESS:	PC	D BOX 0840,	ITALY	, TX 76651-0840)		UTILI	TIES & DIS	
CONTACT PER	RSON:		18	m	mu De	U 1	ic		-SECTION	·
LOCATION OF	SERVICE:		3	Û,	Ava	Je	m			
The backflow p regulations and	revention assertified to b	mbly e ope	detailed below erating within a	v has accept	been tested and r table parameters.	nainta	ained as required	l by cor	nmission	
				1	TYPE OF ASSEM	BLY				
	Reduced Pr Double Che Pressure Va	ck Va	lve				Reduced Press Double Check- Spill-Resistant	Detect	or	
Manufacturer						Size				
Model Number Serial Number					Loca	ted A	e t			
Is the assembly	installed in acc	ordar	nce with manu	Ifactu	er recommendati	ions a	and/or local code	s?		
		Red	luced Pressure P	rincipal	Assembly		Pr	essure Va	acuum Breaker	
	Double 1st Check		Valve Assembly 2nd Chec	<u></u>	Relief Valve		Air Inlet		1	ck Valve
Initial Test	Held at		Held at		Opened at	•	Opened at	<u> </u>	Held at	
	psid Closed Tight Leaked	R	psid Closed Tight Leaked		psid Did Not Open		psid Did Not Open		psid Leaked	
Repairs and		اروط	- June u							
Materials Used										
Test After	Held at		Held at		Opened at		Opened at		Held at	
Repair	psid Closed Tight		psid Closed Tight		Psid		psid		psid –	
Tested gauge use	ed: Make/Mod	el			SN:		· · · · · · · · · · · · · · · · · · ·	Calibra	ation Date:	
Remarks:		····-	AVB		Not -	105	I Chho			
The above is certi	fied to be true	at the	time of testin	g.	7.					·
Firm Name					Certified Tester		······			
Firm Address					Cert. Tester No					·······
Firm Phone #					Date					
TEST RECORDS ML	JST BE KEPT FO	RATL	EAST THREF Y	EARS						······

Celest Carroll PO Box 0888 Italy, TX 76651-0888

PER ORDINANCE NO. 10-1108-02





Dear Ms. Carroll:

RE:

UTILITIES & DISTRICTS SECTION

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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This is a service that the City of Italy can provide for a minimal fee of \$75. You may contact the Backflow Assembly Contractor of your choice, however this contractor must register with the City.

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If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Dean Carrell Public Works Director



The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

	REVENTION	SSEMBLY TEST	AND	MAINTENANCE F	REPC	DRT 🔊	Pr	nana	Ten line
NAME OF PWS	S: <u>CITY</u>	OF ITALY		· · · · · · · · · · · · · · · · · · ·			BC	BUV	R III
PWS I.D.#		0700028				-0-	APF	217 2014	
MAILING ADDF	RESS:	PO BOX 0840	ITAL	Y, TX 76651-0840)	UTI		S & DISTR	ICTS
CONTACT PER	RSON:	(15	A	Corroll			S	ECTION	
LOCATION OF	SERVICE:	90	ĴΥ	Marti	'n				
The backflow p regulations and	revention asser is certified to be	mbly detailed belo e operating within	w has accep	been tested and r table parameters.	naint	ained as required	by co	mmission	
	Double Chec	essure Principle ok Valve cuum Breaker		TYPE OF ASSEM	BLY] Reduced Press] Double Check-[] Spill-Resistant F	Detect	tor	
Manufacturer Model Number Serial Number					Sizo ted A)			
Is the assembly i	nstalled in acco			rer recommendati	ons a	nd/or local codes	?		
	Double (Reduced Pressure F Check Valve Assembly	Principal	Assembly			ssure V	acuum Breaker	
Initial Test	1st Check	2nd Che		Relief Valve		Air Inlet		Chec	sk Valve
initial rest	Held at	Held at psid Closed Tight		Opened at psid Did Not Open		Opened at psid Did Not Open		Held at psid Leaked	
	Closed Tight	I I I a at a t							L.
Repairs and Materials Used	Leaked		<u>L_</u>]						
Materials Used Test After	Leaked Held at	Leaked	L_J	Opened at		Opened at		Hold of	
Materials Used Test After Repair	Leaked			Opened at		Opened at		Held at	
Materials Used Test After Repair Tested gauge use	Leaked Held at psid Closed Tight	Held at psid Closed Tight				psid	Calibra		
Materials Used Test After Repair Tested gauge use Remarks:	Leaked Held at psid Closed Tight d: Make/Mode	Held at psid Closed Tight		psid		psid	Calibra	psid -	
Materials Used Test After Repair Tested gauge use Remarks: The above is certifi	Leaked Held at psid Closed Tight d: Make/Mode	Held at psid Closed Tight		psid		psid	Calibra	psid -	
Materials Used Test After Repair Tested gauge use	Leaked Held at psid Closed Tight d: Make/Mode	Held at psid Closed Tight		Psid SN:		psid	Calibra	psid -	
Materials Used Test After Repair Tested gauge use Remarks: The above is certifi Firm Name	Leaked Held at psid Closed Tight d: Make/Mode	Held at psid Closed Tight		SN:		psid	Calibra	psid -	

David Jenkins 901 Martin Italy, TX 76651-3858





RE: CROSS CONNECTION/BACKFLOW PREVENTION ASSE PER ORDINANCE NO. 10-1108-02

Dear Mr. Jenkins:

UTILITIES & DISTRICTS SECTION

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to protect the City's water supply from contamination or pollution due to plumbing cross-connection or backflow, pursuant to Texas Administration Code, Title 30, Part 1, Chapter 290, Subchapter D, and in particular, Sections 290.44 & 290.46.

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If you have any questions, concerns, or for a copy of this ordinance please do not hesitate to contact City Hall at 972-483-7329 X 0 or Dean Carrell, Public Works Director at 972-483-6212.

Dean Carrell

Public Works Director



The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS		OF ITALY				\square	BR	ENV7	cher.
PWS I.D.#	(0700028				NO.	50	and his (8	SU
MAILING ADDR	ESS:	PO BOX 0840,	TALY,	TX 76651-0840			APR	17 2014	
CONTACT PER	SON:	Dai	rel	111	15	UTIL	ITTES SE	CTION	:rs
LOCATION OF	SERVICE:	4	101	Martir	7				
The backflow pr regulations and	evention assem is certified to be	nbly detailed below e operating within a	v has be accepta	een tested and m ble parameters.	ainta	ined as required l	oy coi	nmission	
-			T۱	PE OF ASSEME	BLY				
	Double Chec	essure Principle & Valve cuum Breaker				Reduced Pressu Double Check-E Spill-Resistant P)etect	or	
Manufacturer					Size				
Model Number				Locate	ed At				
Serial Number									
Is the assembly i	nstalled in acco	ordance with manu			ons ai	nd/or local codes	?		
	Double (Reduced Pressure P Check Valve Assembly	rincipal A	ssembly			isure V	acuum Breaker	
	1st Check		ж. —	Relief Valve		Air Inlet		Chec	k Valve
Initial Test	Held at	Held at		Opened at		Opened at	<u> </u>	Held at	
	psid	psid		sid		psid		psid _	
	Closed Tight Leaked	Closed Tight	H	Did Not Open		Did Not Open		Leaked	
Repairs and Materials									
Used Test After	Held at								
Repair	psid	Held at		Opened at		Opened at		Held at	
L	Closed Tight	Closed Tight		sid		psid		psid	
Tested gauge use	d: Make/Mode	l		SN:		, (Calibra	ation Date:	J
Remarks:	<i>+1</i> _	252 fo f	<u> </u>	lool on	ly	1 NOT	nsp	estion	tope
The above is certil	fied to be true a	at the time of testin	g.		/	*,		Oner	
Firm Name			c	ertified Tester					
Firm Address			c	ert. Tester No					
Firm Phone #									
			D	ate					

3 following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers

BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF P	WS: <u> </u>	FITALY					• •••	
PWS I.D.#	070	00028				切古	GERV	PIN P
MAILING AD	DRESS:	PO BOX 0840, ITAL	Y, TX 76651-08	340		A	PR 1 7 2014	
CONTACT P			teaker			UTILIT	IES & DISTR	
LOCATION (DF SERVICE:	217 Seay	RJ.				SECTION	
The backflow regulations ar	prevention assembled is certified to be o	ہ y detailed below has perating within acce	s been tested and ptable paramete	d maint rs.	ained as requir	ed by co	mmission	
	Reduced Press Double Check V Pressure Vacuu Febco	/alve	TYPE OF ASSE		Reduced Pre Double Chec Spill-Resistar	k-Detect	tor	
Model Number				Size				
Serial Number			Loo	cated A	t Side of	roperty	near water	meter + fer
	y installed in accord	educed Pressure Principa k Valve Assembly	al Assembly			^o ressure V	S acuum Breaker Check	Valve
Initial Test	Held at 2.2	2nd Check Held at 2,4	Relief Valv Opened at	/e				Valve
	psid Closed Tight N Leaked	psid Closed Tight	psid Did Not Open		Opened at psid Did Not Open	 ריז	Held at psid Leaked	
Repairs and							Lounou	
Materials Used								
Test After Repair	Held at	Held at	Opened at		Opened at			
	psid Closed Tight	psid Closed Tight	psid		psid		Held at	
Tested gauge us	sed: Make/Model	Wilkins / TG5	sn: 0/09	2173	3	Calibra	ation Date: 2	/18/13
rne above is cer	tified to be true at th						_	
Firm Name	Rain Masters	Irrigation	Certified Tester		Tustin Bro	wn		
T Address	308 East		Cert. Tester No	00	015096			
Firm Phone #	(972) 872-0		Date	28/1	3			
ILCT DECODDA	UST BE KEPT FOR AT I							

3 following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS		ITALY			0
PWS I.D.#		028		PE	GEWYSIE
MAILING ADDR	ESS: <u>P</u> C	D BOX 0840, ITALY	, TX 76651-0840	A	PR 1 7 2014
CONTACT PER	SON:	Brad Yates		UTILII	TES & DISTRICTS
LOCATION OF		315 Poplar			SECTION
The backflow pro regulations and i	evention assembly is certified to be ope	detailed below has t erating within accept	been tested and mainta table parameters.	ained as required by co	nmission
			YPE OF ASSEMBLY		
		e Principle		Reduced Pressure Pr	incipal-Detector
	Double Check Va Pressure Vacuum			Double Check-Detect	
L		Diedkei		Spill-Resistant Pressu	ire Vacuum Breaker
Manufacturer	Febco		Size	3/4 ¹¹	
Model Number	850		Located A		Al. I.a.
Serial Number	61757			FINI MED INEM	/vieter
		······································	<u> </u>		
is the assembly i	nstalled in accorda	nce with manufactur	rer recommendations a	and/or local codes?	
	Double Check	Juced Pressure Principal	Assembly 7		acuum Breaker
	Double Check	Valve Assembly		Pressure V Air Inlet	acuum Breaker Check Valve
Initial Test	Double Check	Valve Assembly 2nd Check	Relief Valve	Air Inlet	Check Valve
Initial Test	Double Check 1st Check	Valve Assembly			Check Valve Held at
Initial Test	Double Check 1st Check Held at 3.0 psid Closed Tight	Valve Assembly 2nd Check Held at 3,0	Relief Valve Opened at	Air Inlet Opened at	Check Valve Held at psid
	Double Check 1st Check Held at 3.0 psid	Valve Assembly 2nd Check Held at 3.0 psid	Relief Valve Opened at psid	Air Inlet Opened at psid	Check Valve Held at psid
Repairs and	Double Check 1st Check Held at 3.0 psid Closed Tight	Valve Assembly 2nd Check Held at 3,0 psid Closed Tight	Relief Valve Opened at psid	Air Inlet Opened at psid	Check Valve Held at psid
Repairs and Materials	Double Check 1st Check Held at 3.0 psid Closed Tight	Valve Assembly 2nd Check Held at 3,0 psid Closed Tight	Relief Valve Opened at psid	Air Inlet Opened at psid	Check Valve Held at psid
Repairs and	Double Check 1st Check Held at 3.0 psid Closed Tight 1 Leaked 1	Valve Assembly 2nd Check Held at 3.0 psid Closed Tight 4 Leaked 1	Relief Valve Opened at psid Did Not Open	Air Inlet Opened at psid Did Not Open	Check Valve Held at psid Leaked
Repairs and Materials Used	Double Check 1st Check Held at 3.0 psid Closed Tight	Valve Assembly 2nd Check Held at 3,0 psid Closed Tight	Relief Valve Opened at psid Did Not Open	Air Inlet Opened at psid Did Not Open	Check Valve Held at Leaked
Repairs and Materials Used Test After	Double Check 1st Check Held at 3.0 psid Closed Tight Leaked Held at psid	Valve Assembly 2nd Check Held at 3.0 psid Closed Tight 1 Leaked 1 Held at	Relief Valve Opened at psid Did Not Open	Air Inlet Opened at psid Did Not Open	Check Valve Held at psid Leaked
Repairs and Materials Used Test After Repair	Double Check 1st Check Held at Closed Tight [V] Leaked [] Held at psid Closed Tight []	Valve Assembly 2nd Check Held at Jpsid Closed Tight Leaked Held at psid Closed Tight	Relief Valve Opened at psid Did Not Open	Air Inlet Opened at psid Did Not Open Opened at psid	Check Valve Held at Leaked
Repairs and Materials Used Test After Repair	Double Check 1st Check Held at psid Closed Tight [V] Leaked [] Held at psid Closed Tight []	Valve Assembly 2nd Check Held at Jpsid Closed Tight Leaked Held at psid Closed Tight	Relief Valve Opened at psid Did Not Open Opened at Opened at psid	Air Inlet Opened at psid Did Not Open Opened at psid	Check Valve Held at psid Leaked Held at psid
Repairs and Materials Used Test After Repair Tested gauge use Remarks: The above is certif	Double Check 1st Check Held at psid Closed Tight Held at Closed Tight Held at fied to be true at the	Valve Assembly 2nd Check Held at <u>3.0</u> psid Closed Tight Leaked Held at psid Closed Tight Villens/TG5 e time of testing.	Relief Valve Opened at psid Did Not Open Opened at Opened at psid	Air Inlet Opened at psid Did Not Open Opened at psid	Check Valve Held at psid Leaked Held at psid
Repairs and Materials Used Test After Repair Tested gauge use Remarks: The above is certif Firm Name	Double Check 1st Check Held at 3.0 psid 0 Closed Tight 0 Held at 0 Leaked 0 Held at 0 Josid 0 Held at 0 Psid 0 Closed Tight 0 ed: Make/Model fied to be true at the 0 Rain Masters 0	Valve Assembly 2nd Check Held at <u>3.0</u> psid Closed Tight Leaked Held at psid Closed Tight Villeins/TG5 e time of testing.	Relief Valve Opened at	Air Inlet Opened at psid Did Not Open Opened at psid	Check Valve Held at psid Leaked Held at psid
Repairs and Materials Used Test After Repair Tested gauge use Remarks: The above is certif Firm Name	Double Check 1st Check Held at psid Closed Tight Held at Closed Tight Held at fied to be true at the	Valve Assembly 2nd Check Held at <u>3.0</u> psid Closed Tight Leaked Held at psid Closed Tight Closed Tight Willkins/TG5 e time of testing.	Relief Valve Opened at psid Opened at psid SN: Ologal7: Certified Tester	Air Inlet Opened at psid Did Not Open Opened at psid Calibr	Check Valve Held at psid Leaked Held at psid

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS **USE ONLY MANUFACTURER'S REPLACEMENT PARTS

+ following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS:	CITY OF ITALY	DECENVED
PWS I.D.#	0700028	NGO LI COU
MAILING ADDRESS:	PO BOX 0840, ITALY, TX 76651-0840	APR 17 ZUP
CONTACT PERSON:	Brad Yates	UTILITIES & DISTR.C.S SECTION
LOCATION OF SERVIC	E: 317 Poplar	

The backflow prevention assembly detailed below has been tested and maintained as required by commission regulations and is certified to be operating within acceptable parameters.

		TYPE OF ASSEMBLY	
	Reduced Pressure Principle		Reduced Pressure Principal-Detector
	Double Check Valve		Double Check-Detector
	Pressure Vacuum Breaker		Spill-Resistant Pressure Vacuum Breaker
Manufacturer	Febco	Size	3/y"
Model Number	850	Located At	Front Yard Near Meter
Serial Number	56258		

is the assembly installed in accordance with manufacturer recommendations and/or local codes?

		Red	uced Pressure P	rincipal	Assembly		Pressure Vacuum Breaker			r
	Double C	heck	Valve Assembly]		Air Inlet			ck Valve
	1st Check		2nd Che	ck	Relief Valve					
Initial Test	Heid at 2.4		Held at,C	1	Opened at		Opened at		Held at	
	psid	_	psid		psid		psid		psid	
	Closed Tight Leaked		Closed Tight Leaked		Did Not Open		Did Not Open		Leaked	
Repairs and					· · · · · · · · · · · · · · · · · · ·				<u> </u>	······································
Materials Used										
Test After	Heid at		Held at	·	Opened at		Opened at		Heid at	
Repair	psid		psid		psid		psid		psid	
L	Closed Tight		Closed Tight							
Tested gauge use	ed: Make/Mode	1	Wilkins /T	<u>G5</u>	SN: 010921	73	·	Calibra	ation Date:	2/18/13
Remarks:	••••••••••••••••••••••••••••••••••••••									
The above is cert	ified to be true a	at the	e time of testi	ng.						
Firm Name	Rain Masters	1	rrigation		Certified Tester	J	Ustin Brown			
m Address	308 E. Ma				Cert. Tester No	15	5096			
Firm Phone #	(972) 872-	93	00		Date 1/2//	14				

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

City of Italy Backflow Prevention Assembly Test and Maintenance Report

The following form must be completed for each assembly tested. A signed and dated original in to the public water supplier for record keeping purposes:

BACKFLOW PREVENTION ASSEMBLY TEST AND ML	AINTENANCE REP	UNI	• ••	
NAME OF PWS:			UTILITI	ES & DISTR SECTION
PWS I.D.: #	SECTI <u>413 MAIN Street Italy Texas 16</u> <u>Al Tech, Inc</u> <u>E: 413 MAIN Street Italy Texas 76651</u> n assembly detailed below has been tested and maintained as required by commission ied to be operating within acceptable parameters. are Principle <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave}</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Nave</u> <u>Na</u>	16651		
MAILING ADDRESS: 413 MAIN ST	reat.	HALY.	(EXAS	10051
CONTACT PERSON: AL TECH, INC				<u> </u>
LOCATION OF SERVICE 413 MOIN STRE	eet Ita	Ly TEX	15 74	451
TYPE OF ASSEMBLY Reduced Pressure Principle	Reduced Pres		e-Detector	
Double Check Valve			cuum Breake	r
Pressure Vacuum Breaker	. 1	//		
handracteror		MTR		
Model Number	_ Located At			
Serial Number MC				• l
Is the assembly installed in accordance with manufactu	rer recommendatio	ns and/or loc	al codes? 9	~)
Reduced Pressure Principle	Assembly	Pressu	re Vacuum Bi	teaker
Double Check Valve Assembly		Air Inle	t Che	ck Valve
Ist Check 2nd Check	Relief Valve	[1	

	1 Ist Check	2nd Check	Relief valve		
Initial Test	Held at 2:2 psid Closed Tight 1 Leaked 1		Opened at psid Did Not Open 🖵	Opened at psid Did Not Open	Held at psid Leaked
Repairs and Materials Used					
Test After Repair	Held at psid Closed Tight	Held at psid Closed Tight 🛛	Opened at psid	Opened at psid	Held at psid

Test gauge used: Make/Model Conbeaco to-200 SN: 11040547 ____ Calibration Date: _____O/10/12____ Remarks: The above is certified to be true at the time of testing. Certified Tester Kobekt Nel Toxas Tely. +Us Firm Name NoOth BP000 8888 TK. WAU ZED DAK Cert. Tester No. Firm Address 210 AL. 3-4-13

Date

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS ** USE ONLY MANUFACTURER'S REPLACEMENT PARTS

972-829

Firm Phone #

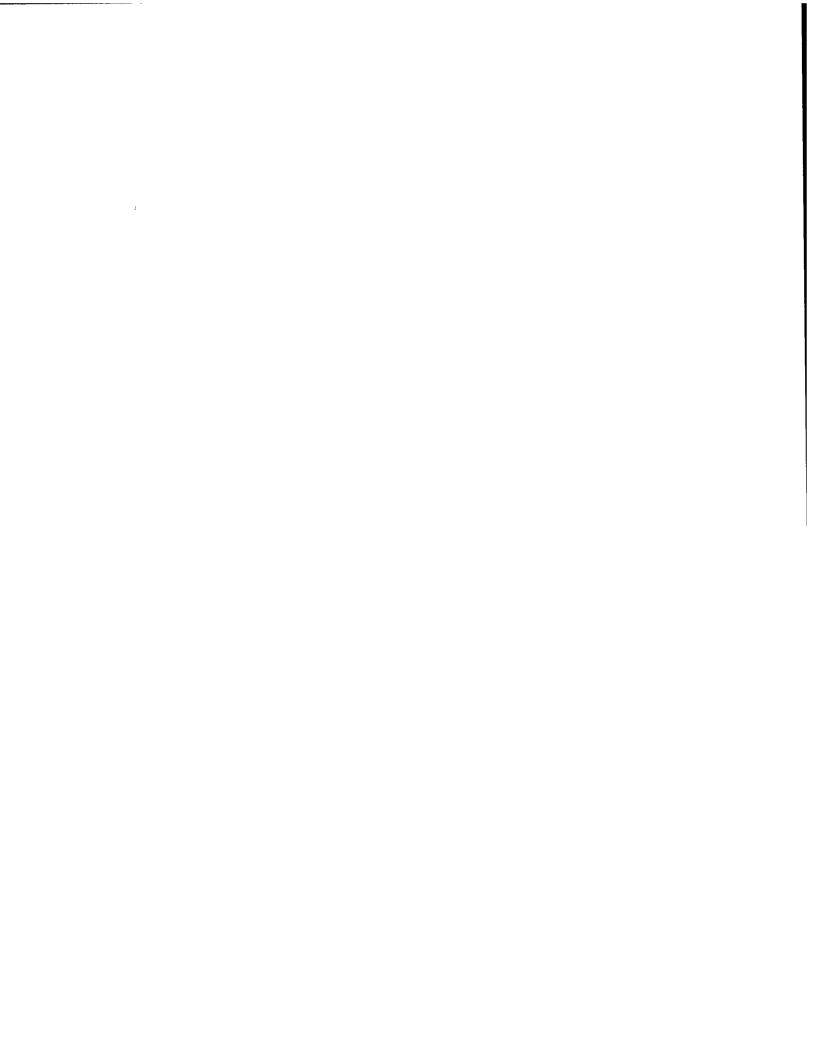
w.collegestreatprinting.com / 972-938-1971

Vbb

0		CITY OF ITALY BACKFLOW PREVENTIO MAINTENANCE REPORT	NTION'ASSEM DRT	CITY OF ITALY BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT	ji.
Howing form must be c record keeping purposes.	be completed for each sees.	assembly tested. A sig	med and dated original m	Nowing form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers cord keeping purposes.	ater suppliers
ACKFLOW PREV	IENTION ASSEM	BLY TEST AND M.	ACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT	ORT	
AME OF PWS:	0700028	ð F			
AILING ADDRESS:		PO BOX 0840, ITALY, TX 78851-0840	TX 78651-0840		
ONTACT PERSON:	_	Stacy Ch	Chambers		
DCATION OF SERVICE:	ι Ω̈́		1. Main		
he backflow preve gulations and is c	ention assembly de certified to be oper	he backflow prevention assembly detailed below has been tested and n gulations and is certified to be operating within acceptable parameters.	een tested and main able parameters.	he backflow prevention assembly detailed below has been tested and maintained as required by commission gulations and is certified to be operating within acceptable parameters.	nmission
	Reduced Pressure Principle Double Check Valve Pressure Vacuum Breaker	rinciple eaker		Y Reduced Pressure Principal-Detector Double Check-Detector Spill-Resistant Pressure Vacuum Breaker	ncipal-Detector x re Vacuum Breaker
lanufacturer	7 chec		ģ	, , , , , , , , , , , , , , , , , , ,	
erial Number		7467-		unter ,	alext 10
, ue assembly ins	stalled in accordan	ce with manufactur	er recommendations	, we assembly installed in accordance with manufacturer recommendations and/or local codes?	red
PASS	Fled Double Check 1st Check	Fieduced Pressure Principal Assembly Double Check Valve Assembly st Check 2nd Check F	Assembly Relief Valve	Pressure V Air inlet	Pressure Vacuum Breaker let Check Valve
	# <u>2</u> , 2		Opened at	Opened at pasid	Heid at
3-15-13 epairs and laterials	psid Ciceed Tight 니eakled	peid Closed Tight	Did Not Open	Did Not Open	
, yter	Held at peid Closed Tight	Held at paid Closed Tight	Opened at	Opened at psid	Heidt at peid
ested gauge used: Make/Model		(aubiaco	SN: 2584	33	Calibration Date: $\frac{g}{2}$
lemarks:					
he above is certified to be true at the time of testing	ied to be true at th	e time of testing.			
im Name 🛛	Project Res	Reparces.	Certified Tester	John Homes	~
Jun Address	Po bix 355	Warde	Tester No	B10004524	
im Phone #	972935:	L 1266	75/48 Date 3	-15-13	
TEST RECORDS MUS	st be kept for at i	TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS			



UTILITIES & DISTRICTS SECTION



The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW PR	EVENTION AS	SEN	BLY TEST AND I	MAINTENANCE REPOI	RT	
NAME OF PWS:		DF II	FALY		DEC	GEUVEN
PWS I.D.#	07	7000)28		U AF	<u>R 1 7 2014</u>
MAILING ADDRE	ESS:	PO	BOX 0840, ITALY	Y, TX 76651-0840		ES & DISTRICTS
CONTACT PER	SON:		Dean (Correll		SECTION
LOCATION OF S	ERVICE:		Hwy	34 Smolle	Nouse Fir	e Hydrant
The backflow pre regulations and is	evention assemines certified to be	bly d ope	letailed below has rating within accep	been tested and mainta stable parameters.	ained as required by cor	nmission
				TYPE OF ASSEMBLY		
	Reduced Pres Double Check Pressure Vac	Val	lve		Reduced Pressure Pri Double Check-Detect Spill-Resistant Pressu	or
Manufacturer	IN LAT	1	5	Size	211	
Model Number	0097	n:	2 DT RP			
Serial Number	297	0.	46	/	t Smoke How Fire Hydrant Met	er # 24530 00
Is the assembly in	nstalled in acco	rdan	ice with manufactu	urer recommendations a	and/or local codes?	
	[Red	uced Pressure Principa	al Assembly	Pressure V	acuum Breaker
	Double C		Valve Assembly	7 ,	Air Inlet	Check Valve
	1st Check		2nd Check	Relief Valve		
Initial Test	Held at		Held at	Opened at	Opened at	Held at
	psid Closed Tight	P	Closed Tight	Did Not Open	psid Did Not Open	psid Leaked
Repairs and Materials Used	Leaked		Leaked			
Test After	Held at		Held at	Opened at	Opened at	Held at
Repair	psid Closed Tight		psid Closed Tight	Psid	psid	psid
Tested gauge use	d: Make/Mode	1		SN: 117758		ation Date: 06-04-14
Remarks:	Set in	p_	for Cont	Contract		
The above is certi	fied to be true a	t the	e time of testing.	(contract)	Meter # 35 5529	1012
Firm Name	City Of I	F.	sly	_Certified Tester	Dean Carrel	1
Firm Address	413 0	10	rk		38 000 9204	
Firm Phone #	972-483-	4	2/2	_Date <u>12-16-</u>		

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS



The following form must be completed for each assembly tested. A signed and dated original must be submitted to the public water suppliers for record keeping purposes.

BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS		TALY		Г	DRCI	PINER	
PWS I.D.#	0700	028			REC.		
MAILING ADDR	ESS: <u>P</u> C	D BOX 0840, ITAL	Y, TX 76651-0840		APR	1 / 2014	
CONTACT PER	SON:	Dean	Correll	(& DISTRICTS CTION	
LOCATION OF	SERVICE:	Fire Hyp	hent cont	Emq: Ell	is Ca	nty wate	r
The backflow pro regulations and i	evention assembly is certified to be ope	detailed below has	been tested and mai	•		-	
			TYPE OF ASSEMBL	Y			
	Reduced Pressur	e Principle		Reduced Press	sure Princi	nal-Detector	
M	Double Check Va			Double Check-	Detector		
	Pressure Vacuun	n Breaker				acuum Breaker	
Manufacturer	Wat	45	g	Size \mathcal{Q}''			
Model Number	007 W	I D'T DO			1111	te it set	
Serial Number	201	<u> </u>			1440100	nt 14 54	
		202	<	3907 00 Contra	iet Mer	ter	
Is the assembly i	nstalled in accorda	nce with manufactu	urer recommendation	s and/or local code	s?		
	Rec	luced Pressure Principa	al Assembly	Pr	essure Vacuu	ım Breaker	——––––––––––––––––––––––––––––––––––––
		Valve Assembly		Air Inlet		Check Valve	
<u> </u>	1st Check	2nd Check	Relief Valve				
Initial Test	Held at	Held at	Opened at	Opened at	He	id at	
	psid	psid	psid	psid	psi	d	
	Closed Tight	Closed Tight	Did Not Open	Did Not Open		aked	
Repairs and		Leaked	4				
Materials							
Used							
Test After	Held at	Held at	Opened at	Opened at		d at	
Repair	psid	psid	psid	psid	psic		
	Closed Tight	Closed Tight]		par		1/12
Tested gauge use	d: Make/Model	WATTS	_ SN: _//7/52	3	Calibratio	06-0	4-15 1-14
Remarks:	Set up	Eng ! Con	4: south	Ell'is loan	fil u	later	
The above is certif	fied to be true at the	e time of testing.	Cont	ract Micta	# 55	25250100)
Firm Name	City Of	Ttaly	_Certified Tester	Dean (arel	1	
Firm Address	413 Cla	<u>rk</u>	_Cert. Tester No	BP 000	7204		
Firm Phone #	972-483-	1212	_Date	16-13			

* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS