



Control Number: 42954



Item Number: 6

Addendum StartPage: 0

House Bill (HB) 1600 and Senate Bill (SB) 567 83<sup>rd</sup>  
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.



42954

RECEIVED

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

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

Date: April, 11 2014

RE: City Of Italy – TECQ Questions

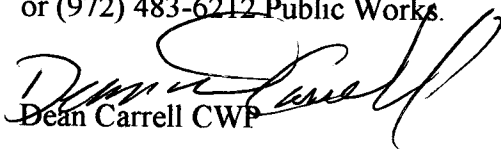
RECEIVED  
APR 17 2014

Att: Crystal Watkins Region 4  
Att: Mary Damron TCEQ Austin

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.

  
Dean Carrell CWP



**RECEIVED**  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

NAME	STORE	ADDRESS	
1 BOUCHARD, KRISTEN	LAUNDRAMAT	201 E MAIN	INTERNAL BPAT
2 CARROLL, CELEST	IRRIGATION	904 MARTIN	NO IRRIGATION NO POOL-NO BACKFLOW REQUIRED
3 CLARK, KENDA	IRRIGATION	717 RHONDA	AVB
4 CONTRACTOR METER		1020 DALE EVANS	SMOKEHOUSE-BACKFLOW DONE-NOT ITALY WATER
5 CONTRACTOR METER		SECW	NOT ACTIVE
6 CUNNINGHAM, AMBER	IRRIGATION	313 HARPOLD	PRESSURE VACCUUM BREAKER
7 DAVIS, TOMMY	IRRIGATION	306 AVALON	NOT ACTIVE
8 DOLLAR GENERAL		761 DALE EVANS	NO REQUIRED-ONE RESTROOM
9 DUNLAP LIBRARY		300 W MAIN	NO REQUIRED-NO SPRINKLER
10 FAMILY DOLLAR	IRRIGATION	413 W MAIN	NOT REQUIRED - ONE BATHROOM
11 GOODWIN, LEE	POOL	801 HWY 667	AVB
12 HYLES CAR WASH	CAR WASH	501 MOSLEY	REDUCE PRESSURE ZONE
13 ITALY FAMILY MEDICINE	IRRIGATION	204 E MAIN	BACKFLOW-1" DOUBLE CHECK
14 ITALY HIGH		300 COLLEGE	BACKFLOW DONE
15 JENKINS, DAVID	SWIM POOL	901 MARTIN	POOL NOT HOOKED INTO WATER SYSTEM-ADVISED TO INSTALL A AIR GAP ON WATER HOSE-A
16 JONES, JERRY BOB	POOL	913 GENOA	AVB
17 MILLER, JONATHAN	IRRIGATION	209 E MAIN	BACKFLOW-1" DOUBLECHECK
18 MULLER, KEVIN	IRRIGATION	320 S WARD	PRESSUREREDUCE VACCUUM BREAKER
19 PIZZA INN	IRRIGATION	100 LR CAMPBELL	NOT ITALY WATER
20 PIZZA INN	RESTAUNT	100 LR CAMPBELL	NOT ITALY WATER
21 RUDOLPH, CRAIG	CAR WASH	100 SIMMS	AIR GAP
22 STAFFORD ELEMENTARY		301 HARRIS	BACKFLOW DONE
23 SUBWAY	RESTAUNT	100 LR CAMPBELL	NOT ITALY WATER
24 TACO BELL	RESTAUNT	100 LR CAMPBELL	NOT ITALY WATER
25 TATUM, BROWDER	IRRIGATION	313 S WARD	POOL NOT HOOKED INTO WATER SYSTEM-ADVISED TO INSTALL A AIR GAP ON WATER HOSE-A
26 TEXAS BEST	RESTAUNT	1020 DALE EVANS	NOT ITALY WATER
27 TRINITY MISSION		220 DAVENPORT	BACKFLOW DONE
28 UPCHURCH FIELDS	IRRIGATION	200 W DILWORTH	BACKFLOW DONE
29 WEAVER, JIMMY	IRRIGATION	713 DALLAS	NOT ACTIVE
30 WHITEAKER, CAROLYN	IRRIGATION	217 SEAY RD	BACKFLOW DONE
31 WOLAYER, JAN	IRRIGATION	400 S WARD	IRRIGATION REMOVED
32 YATES, BRAD	IRRIGATION	315 POPLAR	BACKFLOW DONE
33 YATES, BRAD	IRRIGATION	317 POPLAR	BACKFLOW DONE



AMND A-  
IDK-  
AVB  
POOL

**RECEIVED**  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

NAME	STORE	ADDRESS
BOUCHARD, KRISTEN		11 RIDGEWOOD DR.
CARROLL, CELEST	IRRIGATION	904 MARTIN
CLARK, KENDA	IRRIGATION	717 RHONDA
CUNNINGHAM, AMBER	IRRIGATION	313 HARPOLD
DAVIS, TOMMY	IRRIGATION	308 AVALON
DOLLAR GENERAL		761 DALE EVANS
DUNLAP LIBRARY		300 W MAIN
ERWIN, LINDA		
FAMILY DOLLAR	IRRIGATION	413 W MAIN
HOASER, HERBERT	OUT OF CL	123 NELLIE BELL LANE
HOOKE, JERRY	OUT OF CL	160 CHAMBERS DR.
HUGHES, DALE	111	130 CHAMBERS DR.
X HYLES CAR WASH	RESTAURANT	100 LR CAMPBELL
ITALY FAMILY MEDICINE	SPRINK	204 E MAIN
ITALY ISD		300 COLLEGE
JENKINS, DAVID	SWIM POOL	901 MARTIN
MOTT, LISA	OUT OF CL	1421 CHAMBERS DR.
MULLER, KEVIN	IRRIGATION	320 S WARD
NEIL, SANDY		
PIZZA INN	IRRIGATION	100 LR CAMPBELL
PIZZA INN	RESTAURANT	100 LR CAMPBELL
RUDOLPH, CRAIG	CAR WASH	100 SIMMS
STAFFORD ELEMENTARY		301 HARRIS
STRICKLAND, DONNA	OUT OF CL	216 CHAMBERS DR.
SUBWAY	RESTAURANT	100 LR CAMPBELL
TACO BELL	RESTAURANT	100 LR CAMPBELL
TATUM, BROWDER	IRRIGATION	313 S WARD
UPCHURCH FIELDS	IRRIGATION	200 W DILWORTH
WEAVER, JIMMY	IRRIGATION	713 DALLAS
X WOLAVER, JAN	IRRIGATION	400 S WARD

100 LR CAMPBELL

✓ AVB

✓ Taco Bell

✓ Taco Bell

✓ X-1

✓ Backflow Removed ✓

AVB

Trinity Mission  
Family Clinic 4 main  
Contractor meter smoke house  
Contractor major South Ellis County Water  
Brad Yates 317 Poplar  
Brad Yates 315 Poplar  
Carlyn Whiteaker 217 Seay Rd  
Italy Elementary 301 Harris

JONES, JERRY BOB 913 GENOA POOL

GOODWIN, LEE 8011 HWY 267 POOL

MILLER, JONATHAN 209 EMMA IRIGATION





January 18, 2013

Kevin Muller  
320 S Ward  
Italy, TX 76651-3774

720 S  
WARD



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

RECEIVED  
APR 17 2014

Dear Mr. Muller:

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.

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.

Sincerely,

Dean Carrell  
Public Works Director





# 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 must be submitted to the public water suppliers for record keeping purposes.

**RECEIVED**  
APR 17 2014

## BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS: CITY OF ITALY

PWS I.D.# 0700028

UTILITIES & DISTRICTS  
SECTION

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Kevin Muller

LOCATION OF SERVICE: 3205 Ward

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  
☒ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☒ Spill-Resistant Pressure Vacuum Breaker

Manufacturer Wilkins  
Model Number 720-A  
Serial Number 600-400C

Size 1"  
Located At Front yard

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at <u>3</u> psid Did Not Open <input type="checkbox"/>	Held at <u>4.1</u> psid Leaked <input type="checkbox"/>
Repairs and Materials Used				<u>Slow to open</u>	
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model \_\_\_\_\_

SN: \_\_\_\_\_

Calibration Date 06-04-13

Remarks:

The above is certified to be true at the time of testing.

Firm Name

Certified Tester

Firm Address

Cert. Tester No

Firm Phone #

Date

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS





# 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 must be submitted to the public water suppliers for record keeping purposes.

## BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

**RECEIVED**  
APR 17 2014

NAME OF PWS: CITY OF ITALY

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

UTILITIES & DISTRICTS  
SECTION

CONTACT PERSON: Dean Carrell

LOCATION OF SERVICE: City Park 200 Dillworth

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  
☒ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer WATTS  
Model Number 007MI-DT  
Serial Number 198947

Size 2"  
Located At West Field

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>2.4</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>2.7</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model WATTS SN: 117758

Calibration Date: 06-04-13  
06-04-14

Remarks: None

The above is certified to be true at the time of testing.

Firm Name City of Italy Certified Tester Dean Carrell  
Firm Address 413 Clark Cert. Tester No BP-0009204  
Firm Phone # 972-483-6212 Date 04-12-14

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





# 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 must be submitted to the public water suppliers for record keeping purposes.

## BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

**RECEIVED**  
APR 17 2014

NAME OF PWS: CITY OF ITALY

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

UTILITIES & DISTRICTS  
SECTION

CONTACT PERSON: Cunningham Amber

LOCATION OF SERVICE: 313 Harpold

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.

- ☐ Reduced Pressure Principle  
☒ Double Check Valve  
☐ Pressure Vacuum Breaker

### TYPE OF ASSEMBLY

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer Fabco  
Model Number 850  
Serial Number 67846

Size 3/4"  
Located At Front Yard

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

	Reduced Pressure Principal Assembly				Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve	
	1st Check	2nd Check				
Initial Test	Held at <u>2.7</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>2.0</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>	
Repairs and Materials Used						
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid	

Tested gauge used: Make/Model WATTS SN: 117758

Calibration Date 06-14-13

Remarks: New about 1 year

The above is certified to be true at the time of testing.

Firm Name City of Italy Certified Tester Dean Carrell  
Firm Address 413 Clark Cert. Tester No BP. 0009204  
Firm Phone # 972-483-6212 Date 04-12-14

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







# CITY OF ITALY BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

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 PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

RECEIVED  
APR 17 2014

NAME OF PWS: CITY OF ITALY

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

UTILITIES & DISTRICTS  
SECTION

CONTACT PERSON: Jerry Bob Jones

LOCATION OF SERVICE: 913 Goney

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  
☐ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer \_\_\_\_\_  
Model Number \_\_\_\_\_  
Serial Number \_\_\_\_\_

Size \_\_\_\_\_  
Located At \_\_\_\_\_

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model New Tool SN: AUB Calibration Date: Not Testable

Remarks: New Tool AUB Not Testable

The above is certified to be true at the time of testing.

Firm Name \_\_\_\_\_ Certified Tester \_\_\_\_\_  
Firm Address \_\_\_\_\_ Cert. Tester No \_\_\_\_\_  
Firm Phone # \_\_\_\_\_ Date \_\_\_\_\_

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS





# 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 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

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Lee Goodwin

LOCATION OF SERVICE: 801 HWY 667

**RECEIVED**  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

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  
☐ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer \_\_\_\_\_  
Model Number \_\_\_\_\_  
Serial Number \_\_\_\_\_

Size \_\_\_\_\_  
Located At \_\_\_\_\_

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model \_\_\_\_\_ SN: \_\_\_\_\_ Calibration Date: \_\_\_\_\_

Remarks: Hose to fill pool A/B Not Testable

The above is certified to be true at the time of testing.

Firm Name \_\_\_\_\_ Certified Tester \_\_\_\_\_  
Firm Address \_\_\_\_\_ Cert. Tester No \_\_\_\_\_  
Firm Phone # \_\_\_\_\_ Date \_\_\_\_\_

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

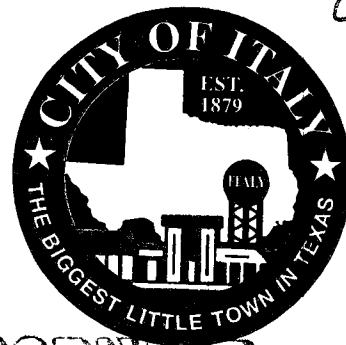
\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS



January 18, 2013

Browder Tatum  
313 S Ward  
Italy, TX 76651-3580

2/17/13 WARD  
AUB 1



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

RECEIVED  
APR 17 2014

Dear Mr. Tatum:

The City of Italy adopted an Ordinance No. 10-1108-02, the purpose of which is to **SECTION** 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.

Sincerely,

Dean Carrell  
Public Works Director





# CITY OF ITALY BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

AVLS

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: CITY OF ITALY

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Broucker Tatom

LOCATION OF SERVICE: 3135 Ward

**RECEIVED**  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

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  
☐ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer \_\_\_\_\_

Model Number \_\_\_\_\_

Serial Number \_\_\_\_\_

Size \_\_\_\_\_

Located At \_\_\_\_\_

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model \_\_\_\_\_

SN: \_\_\_\_\_

Calibration Date: \_\_\_\_\_

Remarks: water with hose AVB not testable

The above is certified to be true at the time of testing.

Firm Name \_\_\_\_\_

Certified Tester \_\_\_\_\_

Firm Address \_\_\_\_\_

Cert. Tester No \_\_\_\_\_

Firm Phone # \_\_\_\_\_

Date \_\_\_\_\_

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS





January 18, 2013

Tommy Davis  
PO Box 0882  
Italy, TX 76651-0882

306 AVAZON  
INA  
AUB



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

RECEIVED  
APR 17 2014

Dear Mr. Davis:

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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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.

Sincerely,

Dean Carrell  
Public Works Director





# 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 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

PWS I.D.# 0700028

**RECEIVED**  
APR 17 2014

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

UTILITIES & DISTRICTS  
SECTION

CONTACT PERSON: Tommy Davis

LOCATION OF SERVICE: 306 Avalon

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  
☐ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer \_\_\_\_\_  
Model Number \_\_\_\_\_  
Serial Number \_\_\_\_\_

Size \_\_\_\_\_  
Located At \_\_\_\_\_

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model \_\_\_\_\_ SN: \_\_\_\_\_ Calibration Date: \_\_\_\_\_

Remarks: AVB not Testable

The above is certified to be true at the time of testing.

Firm Name \_\_\_\_\_ Certified Tester \_\_\_\_\_  
Firm Address \_\_\_\_\_ Cert. Tester No \_\_\_\_\_  
Firm Phone # \_\_\_\_\_ Date \_\_\_\_\_

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS



January 18, 2013

Celest Carroll  
PO Box 0888  
Italy, TX 76651-0888

904/MAR/2013  
IDK  
AVB



RECEIVED  
APR 17 2014

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

Dear Ms. Carroll:

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.

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.

Sincerely,

Dean Carrell  
Public Works Director



# CITY OF ITALY BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT





January 18, 2013

David Jenkins  
901 Martin  
Italy, TX 76651-3858

901 MARTIN  
HKS  
HAS A SWIM  
POOL  
AUB



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

RECEIVED  
APR 17 2014

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.

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.

Sincerely,

Dean Carrell  
Public Works Director





# CITY OF ITALY BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

AVD

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: CITY OF ITALY

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: David Jenkins

LOCATION OF SERVICE: 901 Martin

RECEIVED  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

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  
☐ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer \_\_\_\_\_  
Model Number \_\_\_\_\_  
Serial Number \_\_\_\_\_

Size \_\_\_\_\_  
Located At \_\_\_\_\_

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model \_\_\_\_\_ SN: \_\_\_\_\_ Calibration Date: \_\_\_\_\_

Remarks: Hose to fill Pool only no inspection to be  
"Done"

The above is certified to be true at the time of testing.

Firm Name \_\_\_\_\_ Certified Tester \_\_\_\_\_  
Firm Address \_\_\_\_\_ Cert. Tester No \_\_\_\_\_  
Firm Phone # \_\_\_\_\_ Date \_\_\_\_\_

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





# 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 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

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Carolyn Whiteaker

LOCATION OF SERVICE: 217 Seay Rd.

**RECEIVED**  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

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  
☒ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer Febco

Model Number 850

Serial Number 12336

Size 1"  
Located At Side of property near water meter + fence

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>2.2</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>2.4</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model Wilkins / TG5 SN: 01092173

Calibration Date: 2/18/13

Remarks: \_\_\_\_\_

The above is certified to be true at the time of testing.

Firm Name Rain Masters Irrigation

Certified Tester Justin Brown

Firm Address 308 East Madison

Cert. Tester No 0015096

Firm Phone # (972) 872-9300

Date 10/28/13

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS





# 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 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

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Brad Yates

LOCATION OF SERVICE: 315 Poplar

**RECEIVED**  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

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  
☒ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer Febco  
Model Number 850  
Serial Number 61757

Size 3/4"  
Located At Front Yard Near Meter

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>3.0</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>3.0</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model Willis/TG5 SN: 01092173

Calibration Date: 2/18/13

Remarks:

The above is certified to be true at the time of testing.

Firm Name Rain Masters Irrigation Certified Tester Justin Brown

Firm Address 308 E. Madison Cert. Tester No 15096

Firm Phone # (972) 872-9300 Date 1/21/14

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS







# 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 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

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Brad Yates

LOCATION OF SERVICE: 317 Poplar

**RECEIVED**  
APR 17 2014

UTILITIES & DISTRICTS  
SECTION

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

- |  |  |
|--|--|
| <input type="checkbox"/> Reduced Pressure Principle    | <input type="checkbox"/> Reduced Pressure Principal-Detector     |
| <input checked="" type="checkbox"/> Double Check Valve | <input type="checkbox"/> Double Check-Detector                   |
| <input type="checkbox"/> Pressure Vacuum Breaker       | <input type="checkbox"/> Spill-Resistant Pressure Vacuum Breaker |

Manufacturer Febco  
Model Number 850  
Serial Number 56258

Size 3/4"  
Located At Front Yard Near Meter

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>2.4</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>2.9</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model Wilkins/TG5 SN: 01092173 Calibration Date: 2/18/13

Remarks: \_\_\_\_\_

The above is certified to be true at the time of testing.

Firm Name RainMasters Irrigation Certified Tester Justin Brown  
Firm Address 308 E. Madison Cert. Tester No 15096  
Firm Phone # (972) 872-9300 Date 1/21/14

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS



# 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 must be submitted to the public water supplier for record keeping purposes:

**RECEIVED**  
APR 17 2014

### BACKFLOW PREVENTION ASSEMBLY TEST AND MAINTENANCE REPORT

NAME OF PWS: \_\_\_\_\_ UTILITIES & DISTRICTS SECTION

PWS I.D.: # \_\_\_\_\_

MAILING ADDRESS: 413 MAIN Street Italy TEXAS 76651

CONTACT PERSON: AI Tech, Inc

LOCATION OF SERVICE: 413 MAIN Street Italy TEXAS 76651

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
- ☒ Double Check Valve
- ☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principle-Detector
- ☐ Double Check-Detector
- ☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer FEALCO Size 1"

Model Number 650 Located At MTR

Serial Number HC 97439

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

	Reduced Pressure Principle Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>2.2</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>2.2</u> psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Test gauge used: Make/Model COMBACO 40-200 SN: 11040547 Calibration Date: 10/10/12

Remarks: \_\_\_\_\_

The above is certified to be true at the time of testing.

Firm Name NORTH TEXAS IRR. + L/S Certified Tester ROBERT CASEY

Firm Address 210 LINA WAY REDDICK TX Cert. Tester No. BP000 8888

Firm Phone # 972-824-1519 Date 3-4-13

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\* USE ONLY MANUFACTURER'S REPLACEMENT PARTS





**Record keeping purposes**

## ACKNOWLEDGMENT

NAME OF PWS: CITY OF ITALY

NS I.D.# 0700028

**PO BOX 0840, ITALY, TX 79651-0840**

CONTACT PERSON: Stacy Chambers

DATE OF SERVICE: 207 W. 101st

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

- |                                     |                            |                          |   |
|-------------------------------------|----------------------------|--------------------------|---|
| <input type="checkbox"/>            | Reduced Pressure Principle | <input type="checkbox"/> | Reduced Pressure Principal-Detector     |
| <input checked="" type="checkbox"/> | Double Check Valve         | <input type="checkbox"/> | Double Check-Detector                   |
| <input type="checkbox"/>            | Pressure Vacuum Breaker    | <input type="checkbox"/> | Spill-Resistant Pressure Vacuum Breaker |

Manufacturer	Size
	type

Model Number	830	Located At	in box next to
Model Number			

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

Reduced Pressure Principal Assembly				Pressure Vacuum Breaker	
Double Check Valve Assembly		Relief Valve		Air Inlet	Check Valve
1st Check	2nd Check				
Held at _____ paid _____ Closed Tight <input type="checkbox"/>	Held at _____ paid _____ Closed Tight <input checked="" type="checkbox"/>	Opened at _____ paid _____ Did Not Open <input type="checkbox"/>	Opened at _____ paid _____ Did Not Open <input type="checkbox"/>	Held at _____ paid _____ Leaked <input type="checkbox"/>	
Leaked <input type="checkbox"/>	Leaked <input type="checkbox"/>				
repairs and intervals used					
test after repair					
Held at _____ paid _____ Closed Tight <input type="checkbox"/>	Held at _____ paid _____ Closed Tight <input type="checkbox"/>	Opened at _____ paid _____	Opened at _____ paid _____	Held at _____ paid _____	

tested gauge used: Make/Model Lorch/ACO SN: 258433 Calibration Date: 8-16-2015

Remarks:

**The above is certified to be true at the time of testing**

Jim Name Royce Karpas Certified Tester John Hennes

Address 110 Box 355 1st Ave. Calif. Tester No BP0001525

Term Phone # 972-935-9764 Date 12/15/00 3-15-13

**TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS**

RECEIVED  
APR 17 2014

APR 17 2014

## UTILITIES & DISTRICTS SECTION





# 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 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

PWS I.D.# 0700028

**RECEIVED**  
APR 17 2014

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

UTILITIES & DISTRICTS  
SECTION

CONTACT PERSON: Dean Carroll

LOCATION OF SERVICE: Hwy 34 Smoke House Fire Hydrant

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  
☐ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer WATTS  
Model Number 009M2 DT RP  
Serial Number 297046

Size 2"  
Located At Smoke House  
Fire Hydrant Meter # 24530

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at _____ psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Held at _____ psid Closed Tight <input checked="" type="checkbox"/> Leaked <input type="checkbox"/>	Opened at <u>4 psi</u> psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model WATTS SN: 117758 Calibration Date: 06-04-14

Remarks: Set up for Contractor meter  
Contract Meter # 55 5529012

The above is certified to be true at the time of testing.

Firm Name City of Italy Certified Tester Dean Carroll  
Firm Address 413 Clark Cert. Tester No BP 000 9204  
Firm Phone # 972-483-6212 Date 12-16-13

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS







# 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 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

PWS I.D.# 0700028

MAILING ADDRESS: PO BOX 0840, ITALY, TX 76651-0840

CONTACT PERSON: Dean Carroll

RECEIVED  
APR 17 2014  
UTILITIES & DISTRICTS  
SECTION

LOCATION OF SERVICE: Fire Hydrant Cont Emg: Ellis County Water

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  
☒ Double Check Valve  
☐ Pressure Vacuum Breaker

- ☐ Reduced Pressure Principal-Detector  
☐ Double Check-Detector  
☐ Spill-Resistant Pressure Vacuum Breaker

Manufacturer Watts

Model Number 007 M1 QT DC

Serial Number 201555

Size 2"  
Located At 10" Fire Hydrant Hy 34  
3907<sup>00</sup> Contract Meter

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

	Reduced Pressure Principal Assembly			Pressure Vacuum Breaker	
	Double Check Valve Assembly		Relief Valve	Air Inlet	Check Valve
	1st Check	2nd Check			
Initial Test	Held at <u>2</u> psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Held at <u>2</u> psid Closed Tight <input type="checkbox"/> Leaked <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Opened at _____ psid Did Not Open <input type="checkbox"/>	Held at _____ psid Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test After Repair	Held at _____ psid Closed Tight <input type="checkbox"/>	Held at _____ psid Closed Tight <input type="checkbox"/>	Opened at _____ psid	Opened at _____ psid	Held at _____ psid

Tested gauge used: Make/Model WATTS SN: 117758

Calibration Date: 06-04-13  
06-04-14

Remarks: Set up Emg: Cont: South Ellis County Water  
Contract # 35 25250100

The above is certified to be true at the time of testing.

Firm Name City Of Italy

Certified Tester Dean Carroll

Firm Address 413 Clark

Cert. Tester No BP 0009204

Firm Phone # 972-483-6212

Date 12-16-13

\* TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS

\*\*USE ONLY MANUFACTURER'S REPLACEMENT PARTS

