Reporting Procedures for All New Combination and Dedicated Fire Line Backflow Assemblies

1. All new Backflow Assemblies must be permitted. For specific instructions on Fire Line Backflow Assembly permits, please contact the Cross Connection Control office at 817-392-8375.

2. The Fort Worth Water Department (FWWD) does not perform testing of backflow assemblies on Fire Lines (regardless of location).

3. All testing must be completed by a private testing contractor (must be a Fire Line Company for Dedicated Fire Lines) that is registered with the FWWD Backflow Cross Connection Section.

4. After getting passing test results, leave original Test Forms in a sealed bag, attached (zip-tied) to the underside of the vault lid or on the assembly if it is located inside a building.

5. Test Forms for Double Check Detector Assemblies (DCDA’s) must include information for the Double Check Assembly as well as the by-pass meter and must include size and type of meter, meter number and reading. Test Forms will not be accepted without this information. (4 items rqrd.)

6. Incomplete, inaccurate, and/or illegible Test Forms shall be considered invalid and will result in a failed inspection.

7. The backflow office must be notified that the assemblies are ready for inspection, by calling our office at 817-392-8375 to request a (Fire Line Backflow) inspection request form. Completed form must be email to Backflow@fortworthtexas.gov or faxed to 817-392-8834 to schedule inspection.

8. Inspection of associated vault and assembly installation will be done by a FWWD / Backflow Cross Connection Technician.

9. If installation of assembly, including vault, is not completed in accordance with FWWD specifications, the installation will not be approved. Corrections will need to be performed and a re-inspection scheduled.

10. Final approval (Green Tag) will not be issued until all the above provisions have been met.

11. If location of the Fire Line Backflow Assembly is greater than 100 ft. from the tap, the assembly must be located at or near the property line.

12. Water Department approval is required prior to Fire Department approval.

* Be sure to designate hazard type on test report form (Fire Line, Fire Line by-pass or Anti-Freeze Loop)

Rev. 06/29/12
BACKFLOW INSPECTION REQUEST FORM

Date Requested: __________________________  Time Requested: ______________ AM/PM

Installer Company Name: ________________________________________________________________

Contact Person: ___________________________ Phone: ________________________________

Testing Company: ___________________________ Fax #: ________________________________

Tester: ___________________________ Phone: ________________________________

Name of Facility: ____________________________________________________________Mapsco ___

Assembly Physical Address: _______________________________________________________

Facility Mailing Address: ______________________________________________________________________________________

- Dedicated Fire Line (Non-Metered Water) ___  Combination (Fire/Domestic Water) ___
- Anti-Freeze Loop ___
- Vault?  Y / N Depth: ______ ft
- Permanently attached ladder?  Y / N
- Plugs (vault - threaded, non-ferrous, finger tight, no sealant) in all test ports?  Y / N
- Type of Assembly Used:  DCDA _____  DCVA _____  RPDA _____  RPZA _____

<table>
<thead>
<tr>
<th>Assembly</th>
<th>Bypass Assembly</th>
<th>Bypass Meter</th>
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<tr>
<td>Size _____</td>
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<td>S/N ___________</td>
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<td>Reading ___________</td>
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Give Detailed Location of Assembly and Original Paperwork: ____________________________________________
_____________________________________________________________________________________________________________________

CITY INSPECTION INFORMATION -- Approved?  Y / N  Technician Initials: ___________

Date: ________________  Time: ________________ AM / PM

Reason for RED Tag: ______________________________________________________________________________________________

Location of GREEN Tag: ____________________________________________________________________________________________

To schedule inspection: fax completed form to (817) 392-8834 or email to backflow@fortworthtexas.gov

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