

**American Society of Sanitary Engineering
Seal (Certification) Program**

**Factory Audit Inspection Test for:
Backflow Preventer for Beverage Dispensing Equipment**

**Tested under ASSE Standard 1022 • ASSE 2003 • ANSI: 2003
Factory Audit Inspection Test**

Manufacturer _____
Model No. _____
Address _____
Serial No. _____
Other Identification Markings _____
Size _____
Connections (screwed, flanged, etc.) _____

3.3 Atmospheric Port Leakage

Low Pressure:

What was the pressure shown on gauge #2? _____ p.s.i. (_____ kPa)

What was the flow rate? _____ gpm (_____ L/s)

The test period was _____ minutes

High Pressure:

What was the pressure shown on gauge #2? _____ p.s.i. (_____ kPa)

What was the flow rate? _____ gpm (_____ L/s)

The test period was _____ minutes

Was there any leakage from the atmospheric port? Yes No Questionable

If questionable, explain: _____

3.6 Check Valve Sealing Pressure

Upstream Check Valve:

The test period was _____ minutes

Water column level? _____ in. (_____ mm)

In compliance? Yes No Questionable

If questionable, explain: _____

Downstream Check Valve:

The test period was _____ minutes

Water column level? _____ in. (_____ mm)

In compliance? Yes No Questionable

If questionable, explain: _____

3.8 Atmospheric Port-Opening Pressure

Low Pressure:

What was the inlet pressure? _____ p.s.i. (_____ kPa)

What was outlet pressure? _____ p.s.i. (_____ kPa)

At what differential pressure did the atmospheric port open? _____ p.s.i. (_____ kPa)

Intermediate Pressure:

What was the inlet pressure? _____ p.s.i. (_____ kPa)

What was outlet pressure? _____ p.s.i. (_____ kPa)

At what differential pressure did the atmospheric port open? _____ p.s.i. (_____ kPa)

High Pressure:

What was the inlet pressure? _____ p.s.i. (_____ kPa)

What was outlet pressure? _____ p.s.i. (_____ kPa)

At what differential pressure did the atmospheric port open? _____ p.s.i. (_____ kPa)

In compliance? Yes No Questionable

If questionable, explain: _____

TESTING AGENCY _____

ADDRESS _____

PHONE: _____ FAX: _____

TEST ENGINEER(S) _____

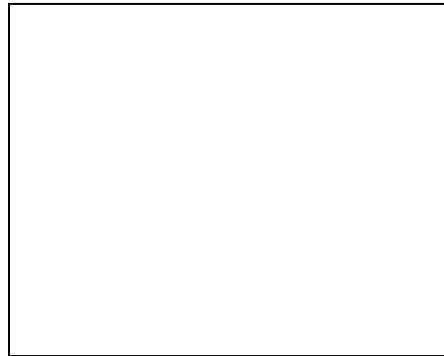
We certify that the evaluations are based on our best judgments and that the test data recorded is an accurate record of the performance of the device on test.

Signature of the official of the agency: _____

Title of the official: _____ Date: _____

Signature and seal of the Registered Professional Engineer
supervising the laboratory evaluation:

Signature



Seal