

**ASSE International  
Product (Seal) Listing Program**

**ASSE 1055-2018  
Chemical Dispensing Systems with Integral Backflow Protection**

**Manufacturer:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Laboratory:** \_\_\_\_\_ **Laboratory File Number:** \_\_\_\_\_

**Model # Tested:** \_\_\_\_\_

**Model Size:** \_\_\_\_\_

**Additional models report applies to:** \_\_\_\_\_

**Additional Model Information (i.e. orientation, series, end connections, shut-off valves)**

\_\_\_\_\_

**Date models received by laboratory:** \_\_\_\_\_ **Date testing began:** \_\_\_\_\_

**Date testing was completed** \_\_\_\_\_

**If models were damaged during shipment, describe damages:**

\_\_\_\_\_

**Prototype or production sample?** \_\_\_\_\_

**Were all tests performed at the selected laboratory?**  Yes  No

**If offsite, identify location:** \_\_\_\_\_

**General information and instructions for the testing engineer:**

*The results within this report apply only to the models listed above.*

There may be items for which the judgment of the test engineer will be involved. Should there be a question of compliance with that provision of the standard, a conference with the manufacturer should be arranged to enable a satisfactory solution of the question.

Should disagreement persist and compliance remain in question by the test agency, the agency shall, if the product is in compliance with all other requirements of the standard, file a complete report on the questionable items together with the test report, for evaluation by the ASSE Seal Control Board. The Seal Control Board will then review and rule on the question of compliance with the intent of the standard then involved.

Documentation of material compliance must be furnished by the manufacturer. The manufacturer shall furnish to the testing agency, a bill of material which clearly identifies the material of each part included in the product construction. This identification must include any standards which relate thereto.

## Section I

### 1.0 General

### 1.2 Scope

#### 1.2.1 Description

Does this device conform to the product stated in the standard?

Yes  No  Questionable

If no or questionable, explain \_\_\_\_\_

#### 1.2.2 Pressure Range

What is the pressure range as indicated by the manufacturer?

Minimum: \_\_\_\_\_psi (\_\_\_\_\_kPa) Maximum: \_\_\_\_\_psi (\_\_\_\_\_kPa)

#### 1.2.3 Temperature Range

Is this a cold water or hot water device?

Cold water  Hot water  Questionable

If no or questionable, explain \_\_\_\_\_

What is the temperature range as indicated by the manufacturer?

Minimum: \_\_\_\_\_°F (\_\_\_\_\_°C) Maximum: \_\_\_\_\_°F (\_\_\_\_\_°C)

## Section II

### 2.0 Test Specimens

2.1 How many samples were received? \_\_\_\_\_

## Section III

### 3.0 Performance Requirements and Compliance Testing

#### 3.1 Tipping

##### 3.1.1 Purpose

Is this dispenser a free standing device?

Yes  No  Questionable

If no or questionable, explain \_\_\_\_\_

##### 3.1.3 Criteria

If yes, did the device return after each test to the upright position when tipped from all four directions?

Yes  No  Questionable

If no or questionable, explain \_\_\_\_\_

In compliance?

Yes  No  Questionable

If no or questionable, explain \_\_\_\_\_

#### 3.2 Deterioration at Extremes of Manufacturer's Rated Temperature and Pressure Ranges and Endurance Test

##### 3.2.2 Procedure

Temperature of water cycled through the device: \_\_\_\_\_°F (\_\_\_\_\_°C)

Water pressure during cycling: \_\_\_\_\_psi (\_\_\_\_\_kPa)

How many continuous hours per day was the device operating? \_\_\_\_\_ hours

How many days was the cycling done for? \_\_\_\_\_ days

How many total cycles were completed? \_\_\_\_\_ cycles

3.2.3 Criteria

Were there any failures?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

Was there any change in physical characteristics of the materials that would prevent compliance with the remaining requirements?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

In compliance?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

3.3 Pressure Tests

3.3.2 Procedure

Water pressure used for the test: \_\_\_\_\_ psi (\_\_\_\_\_ kPa)

How many minutes was the test period? \_\_\_\_\_ minutes

3.3.3 Criteria

Were there any leaks or damage to the device?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

In compliance?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

3.4 Backpressure

3.4.1 Purpose

Is this device intended for use with a discharge hose?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

3.4.2 Procedure

What was the initial backpressure when pressurized?

\_\_\_\_\_ inches of water column (\_\_\_\_\_ kPa)

What was the final backpressure after being increased incrementally?

\_\_\_\_\_ inches of water column (\_\_\_\_\_ kPa)

3.4.3 Criteria

Was there any indication of colored water in the transparent tube?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

In compliance?

Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

3.5 Backsiphonage

3.5.2 Procedure

Were all check members held open?

- Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

When the system was opened to the vacuum source, what was the pressure of the vacuum? \_\_\_\_\_ inches of mercury (\_\_\_\_\_ kPa)

How long was the vacuum held for? \_\_\_\_\_ minutes

How many times was this test repeated? \_\_\_\_\_ times

3.5.3 Criteria

Was there any indication of colored water in the sight glass?

- Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

In compliance?

- Yes       No       Questionable

If no or questionable, explain \_\_\_\_\_

**Section IV**

4.0 Detailed Requirements

4.1 Markings

List the marking information shown on the device: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How were these markings applied on the device? \_\_\_\_\_

4.2 Instructions

Which of the following (if any) were present with the device?

- Installation instructions
- Operation instructions
- Drawings or sketches useful to the installer

4.3 Maintenance

Which of the following (if any) were submitted with the device (check if present)?

- Maintenance instructions
- Replacement Parts List

LISTED LABORATORY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

TEST ENGINEER(S): \_\_\_\_\_

If applicable:

OUTSOURCED LABORATORY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

TEST ENGINEER(S): \_\_\_\_\_

Scope of outsourced testing: \_\_\_\_\_

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 listed laboratory: \_\_\_\_\_

Signature

Title of the official: \_\_\_\_\_ Date: \_\_\_\_\_