

**ASSE International
Practical Examination - Repairer
Student Performance Evaluation Report**

Proctor Name: _____

Student Name: _____

**Reduced Pressure Principal
Backflow Preventer (RP)
ASSE Standard #1013
Repairer Evaluation**

- | | | | |
|-----|--|---------|--------|
| 1. | Did the student properly shut off water supply and safely relieve pressure? | YES () | NO () |
| 2. | Did the student safely take up a position to the side and behind check valve #1, check valve #2 and relief valve covers, to prevent injury, in case of spring retention failure? | YES () | NO () |
| 3. | Did the student use the proper tools? | YES () | NO () |
| 4. | Did the student properly remove the cover for acces to check valve #1, check valve #2 and the relief valve? | YES () | NO () |
| 5. | When applicable, did the student properly use the safety bar to retain spring tension on check valve #1, check valve #2 and the relief valve? | YES () | NO () |
| 6. | Did the student inspect, clean or replace any worn or defective components with factory authorized parts? | YES () | NO () |
| 7. | Did the student reassemble the device using the proper safety procedures? | YES () | NO () |
| 8. | Did the student properly use lubricant during the reassembly of parts? | YES () | NO () |
| 9. | Did the student retest the repaired assembly or demonstrate the field test procedure? | YES () | NO () |
| 10. | Did the student properly record the information on the test form? | YES () | NO () |

Assembly being repaired

Manufacturer:

Model: _____

Size: _____

For Official Use Only

Test Date: _____ Location: _____

I certify that the above named applicant has been tested and has PASSED the above mentioned practical test as established by the ASSE International.

Proctor's Signature: _____

OR



FAILED

Proctor's Signature: _____

**ASSE International
Practical Examination - Repairer
Student Performance Evaluation Report**

Proctor Name: _____

Student Name: _____

**Double Check Backflow
Prevention Assembly (DC)
ASSE Standard #1015
Repairer Evaluation**

- | | | | |
|-----|---|---------|--------|
| 1. | Did the student properly shut off water supply and safely relieve pressure? | YES () | NO () |
| 2. | Did the student safely take up a position to the side and behind check valve #1 and check valve #2, to prevent injury, in case of spring retention failure? | YES () | NO () |
| 3. | Did the student use the proper tools? | YES () | NO () |
| 4. | Did the student properly remove the cover for acces to check valve #1 and check valve #2? | YES () | NO () |
| 5. | When applicable, did the student properly use the safety bar to retain spring tension on check valve #1 and check valve #2? | YES () | NO () |
| 6. | Did the student inspect, clean or replace any worn or defective components with factory authorized parts? | YES () | NO () |
| 7. | Did the student reassemble the device using the proper safety procedures? | YES () | NO () |
| 8. | Did the student properly use lubricant during the reassembly of parts? | YES () | NO () |
| 9. | Did the student retest the repaired assembly or demonstrate the field test procedure? | YES () | NO () |
| 10. | Did the student properly record the information on the test form? | YES () | NO () |

<u>Assembly being repaired</u> Manufacturer: _____
Model: _____
Size: _____

For Official Use Only

Test Date: _____ Location: _____

I certify that the above named applicant has been tested and has PASSED the above mentioned practical test as established by the ASSE International.

Proctor's Signature: _____

OR



FAILED

Proctor's Signature: _____

**ASSE International
Practical Examination - Repairer
Student Performance Evaluation Report**

**Pressure Vacuum Breaker
Assembly (PVBA)
ASSE Standard #1020
Repairer Evaluation**

Proctor Name: _____

Student Name: _____

- | | | | |
|----|---|---------|--------|
| 1. | Did the student properly shut off water supply and safely relieve pressure? | YES () | NO () |
| 2. | Did the student use the proper tools? | YES () | NO () |
| 3. | Did the student properly gain access to the check valve and air inlet valve? | YES () | NO () |
| 4. | Did the student inspect, clean or replace any worn or defective components with factory authorized parts? | YES () | NO () |
| 5. | Did the student reassemble the device using the proper safety procedures? | YES () | NO () |
| 6. | Did the student properly use lubricant during the reassembly of parts? | YES () | NO () |
| 7. | Did the student retest the repaired assembly or demonstrate the field test procedure? | YES () | NO () |
| 8. | Did the student properly record the information on the test form? | YES () | NO () |

<u>Assembly being repaired</u> Manufacturer: _____
Model: _____
Size: _____

For Official Use Only

Test Date: _____ Location: _____

I certify that the above named applicant has been tested and has **PASSED** the above mentioned practical test as established by the ASSE International.

Proctor's Signature: _____

OR



FAILED

Proctor's Signature: _____

**ASSE International
Practical Examination - Repairer
Student Performance Evaluation Report**

Proctor Name: _____

Student Name: _____

**Spill Resistant
Vacuum Breaker (SRVB)
ASSE Standard #1056
Repairer Evaluation**

1. Did the student properly record the information on the test form? YES () NO ()
2. Did the student properly use the test equipment? YES () NO ()
3. Did the student satisfactorily evaluate shut-off valve #1? YES () NO ()
4. Did the student satisfactorily perform the test procedure for evaluation of shut-off valve #2? YES () NO ()
5. Did the student satisfactorily perform the test procedure for evaluation of the check valve? YES () NO ()
6. Did the student satisfactorily perform the test procedure for evaluation of the air inlet valve? YES () NO ()
7. Did the student properly evaluate the performance of the backflow prevention assembly? YES () NO ()
8. Did the assembly pass the performance requirements on the initial test? YES () NO ()
9. Did the student restore the assembly to pretest status? YES () NO ()

Assembly being repaired

Manufacturer: _____

Model: _____

Size: _____

For Official Use Only

Test Date: _____ Location: _____

I certify that the above named applicant has been tested and has PASSED the practical test as established by the ASSE International.

Proctor's Signature: _____

(OR)

Failed Proctor's Signature: _____