

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

**FACTORY AUDIT INSPECTION TEST REPORT FORM ASSE 1003-2020  
Water Pressure Reducing Valves for Domestic Water Distribution Systems**

**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.



**FIRST SAMPLE TEST RESULTS**

**SECTION III**

**3.0 Performance Requirements and Compliance Testing**

**3.1 Hydrostatic Test #1 of Complete Device**

What was the supply pressure at the inlet? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the pressure on the reduced pressure side? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

The test period was for \_\_\_\_\_ minutes.

Did the reduced pressure side, as indicated by gauge #2, remain steady during the test?  
 Yes  No

**3.2 Hydrostatic Test #2 of Complete Device**

What was the supply pressure at the inlet? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the pressure on the reduced pressure side? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

The test period was for \_\_\_\_\_ minutes.

Were there any external leaks?  Yes  No

**3.4 Reduced Flowing Pressure Deviation Test**

With a supply pressure of:

100.0 psi (689.5 kPa), the reduced flowing pressure was \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

150.0 psi (1034.2 kPa), what was the reduced pressure? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

50.0 psi (344.7 kPa), what was the reduced pressure? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

Was the reduced flowing pressure more than 1.0 psi (6.9 kPa) for every 10.0 psi (68.9 kPa) change in the supply pressure?  Yes  No

**3.6 Reduced Pressure Adjustment Range Test**

What was the supply pressure at the inlet of the device on test? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the maximum reduced pressure attainable? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the minimum reduced pressure attainable? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

Was a 25.0 psi (172.4 kPa) adjustment range attained?  Yes  No

Did the first sample pass all the required testing?  Yes  No

If no, test the second sample and record the results below.



**SECOND SAMPLE TEST RESULTS\***

\*A second sample shall only be tested if the first sample failed the necessary test sections.

**SECTION III**

**3.0 Performance Requirements and Compliance Testing**

**3.1 Hydrostatic Test #1 of Complete Device**

What was the supply pressure at the inlet? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the pressure on the reduced pressure side? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

The test period was for \_\_\_\_\_ minutes.

Did the reduced pressure side, as indicated by gauge #2, remain steady during the test?  
 Yes  No

**3.2 Hydrostatic Test #2 of Complete Device**

What was the supply pressure at the inlet? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the pressure on the reduced pressure side? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

The test period was for \_\_\_\_\_ minutes.

Were there any external leaks?  Yes  No

**3.4 Reduced Flowing Pressure Deviation Test**

With a supply pressure of:

100.0 psi (689.5 kPa), the reduced flowing pressure was \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

150.0 psi (1034.2 kPa), what was the reduced pressure? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

50.0 psi (344.7 kPa), what was the reduced pressure? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

Was the reduced flowing pressure more than 1.0 psi (6.9 kPa) for every 10.0 psi (68.9 kPa) change in the supply pressure?  Yes  No

**3.6 Reduced Pressure Adjustment Range Test**

What was the supply pressure at the inlet of the device on test? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the maximum reduced pressure attainable? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

What was the minimum reduced pressure attainable? \_\_\_\_\_ psi ( \_\_\_\_\_ kPa)

Was a 25.0 psi (172.4 kPa) adjustment range attained?  Yes  No

Did the second sample pass all the required testing?  Yes  No

If yes, please provide an explanation of failure for the first sample below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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: \_\_\_\_\_