

City of Corpus Christi - Backflow Prevention Assembly Test and Maintenance Report

The following form must be completed for each assembly tested for recordkeeping *purposes:

City of Corpus Christi
2726 Holly Rd
Corpus Christi, Texas 78415

PWS ID: 1780003
Contact Name: Blanca Villanueva
Phone Number: 361-826-1665

BPAT Information

Company Name: Koetter Fire Protection of Corpus Christi, LLC
Tester Name: Jason Dubose
Address: 229 South Padre Island Drive
Corpus Christi, Texas 78405

Phone Number: 361-814-3473
Email Address: jdubose@koetterfire.com
License Number: BP0021057
License Expiration: 3/17/2025

Location Information

Property Type: Commercial
Business Name: Coastal Bend Wellness Center
Property Address: 2882 Holly Rd
Corpus Christi, TX 78415-4106

Contact Information

Company Name: Coastal Bend Wellness Center
Contact Name: Manager
Mailing Address: 2882 Holly Rd
Corpus Christi, TX 78415-4106
Phone Number: (361)814-2001 ext. 215
Email Address: Amyg@cbwellness.org

Backflow Information

The backflow prevention assembly detailed below has been tested and maintained as required by commission regulations and is certified to be operating within acceptable parameters.

Backflow Method: Pressure Vacuum Breaker
Main Assembly Manufacturer: Febco **Model:** 765 **Size:** 1 1/2 **Serial Number:** H043646
Location: FRONT RIGHT CORNER BY METER
Hazard Type **:** Irrigation - Non Chemical

Backflow Test Information

Test Result: Passed **Job Number:** 33199923
Reason for Test: Existing Installation

Is the assembly installed in accordance with manufacturers recommendations and/or local codes? Yes

Is the assembly installed on a non-potable water supply (auxiliary)? No

Differential pressure gauge used: Backflow Gage TK-15 (potable) **Serial Number:** 003947 **Date Tested for Accuracy:** 10/12/2023

	Pressure Vacuum Breaker	
	Air Inlet	Check Valve
Initial Test Date: 3/4/2024 Time: 9:30 AM	Opened at 2.6 PSID <input type="checkbox"/> Did not open <input checked="" type="checkbox"/> Did it fully open	Held at 3 PSID <input type="checkbox"/> Leaked
Repairs and Materials Used		
Repair Details		
Test After Repairs	Opened at 0 PSID <input type="checkbox"/> Did it fully open	Held at 0 PSID

Additional Information Required by City of Corpus Christi ****

Is there an On-Site Sewage Facility?

Permit Number:

Remarks

The above is certified to be true at the time of testing.
 * TEST RECORDS MUST BE KEPT FOR AT LEAST THREE YEARS [30 TAC 290.46(B)]
 ** USE ONLY MANUFACTURER'S REPLACEMENT PARTS
 *** 2nd Check: Numeric reading required for double check valve only.
 **** Indicates additional information not present on the standard TCEQ report