

D.S.R.S.D. REQUIREMENTS BACKFLOW PREVENTION DEVICE TESTING

- 1) In order for a tester to be added to, and remain on, our Certified Tester list, a copy of the AWWA certificate and the wallet card that shows the expiration date and certificate number must be provided. When a certificate is renewed, we must receive a copy of the current card and new expiration date for the tester to remain on the list.

You **will not** be reminded to send us this information. The list is produced monthly and, should your license not be current, you will automatically be removed from the list.

- 2) Dublin San Ramon Services District Specifications require, in almost all cases, that only Reduced Pressure Principle Devices (RP) be installed. This means that if a current DC can be repaired, you may do so. If, however, it needs to be replaced for any reason whatsoever, an RP must be installed. Variance on this matter is made on a case by case basis and must be approved by a District Cross Connection Control Specialist. ***All devices to be replaced must first be inspected in a field meet with a District Cross Connection Control Specialist. Please contact Stefanie Olson at 925/875-2336, for an appointment.*** All devices installed in new services (with the exception of fire lines) must be reduced pressure principle devices and on the USC FCCCHR current approved list.
- 3) California State Law requires a device to be tested any time it is repaired or replaced. If a device requires servicing outside of a 30-day period prior to the scheduled annual test date, the device must be tested again on the scheduled annual test date.
- 4) If, for any reason, a tester requires a curbstops to be turned on or off, the DSRSD Water Department must be contacted. Testers are **not** to operate curbstops. This is for your own protection. Many testers have taken this action and broken the curbstops. In such a case, the tester is liable for any and all damages incurred.
- 5) The notice for testing is sent to the customers on the annual date. They then contact a tester and forward the paperwork and/or device information to the tester. The information on the device(s) will be contained in the paperwork forwarded to the customer. The accuracy of our records depends upon you and the information you forward to us. If a device is changed out, please make note of new serial numbers, etc.

Once you have received the paperwork from the customer, please contact our office so that we know the device is being handled and by whom. If the device fails, it is the responsibility of the customer to make arrangements with you to have it repaired or replaced. Once a passed test result is obtained and the paperwork is completed, **please forward a signed copy, by fax, mail or hand delivery to the District. Results must be reported on either our form or a form that provides all required information, including the meter serial number and account number.** For your convenience, blank forms are available at our District office located at 7051 Dublin Blvd. in Dublin.

- 6) Extensions are given to testers in cases where the device needs to be repaired or replaced and parts are on order. Other exceptions may be made on a case by case basis. Please contact the Stefanie Olson at 925/875-2336, to receive the extension, if necessary.
- 7) We appreciate your cooperation in compliance with the above requests. Please keep in mind that we offer a list of certified testers to our customers to assure them a selection of competent testers. If we become aware of a tester who is not complying with any of the above listed items, fails to test a device according to standard testing procedures, or falsifies test reports, an investigation into the matter will take place. Consequently, this will be considered grounds for automatic removal from our list in order to protect the interests of our customers and our distribution system.

I, the undersigned, have read and acknowledged these requirements.

Signature _____ **Date** _____

Print Name _____ **Certification #** _____

For (Company Name) _____

Company Address _____

Company Phone Number _____ **Email** _____