

Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # H01543						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 66	600 OWL I	AKE DRIV	<u>'E</u>					
×	Contact Person:								
	Make: FEBCO	Model:			Type of Use	Protection	Orienta	ation	
	, _		VB □ Air C	∃ap					
bly		ate Installed	:		<u></u> Domestic	Containment	Inlet_	Outlet	
Assembly	☐ New ■ Existing				□Fire □ Glycol	☐ Containment by Isolation	<ul><li>Horizo</li></ul>	ntal 🔳	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	☐ Vertica	l Up □	
	Location: OUTSIDI	E NE CORN	ER		☐ Recycled		Vertical	Down □	
							Approved:	Y <b>■</b> N □	
	Line		t Results		F	Repairs		Results	
	PSI: 65 Check Valve #1	Tightness ☐ Leak	Differential		•		Tightness	Differential	
	(RP, DC, PVB)	■ Tight	7.6				☐ Leak		
	Check Valve #2	☐ Leak	TIGHT				☐ Leak		
	(RP, DC)	Tight	110111				☐ Tight		
Testing & Maintenance	Relief Valve		2.2						
	(RP) Buffer								
	(RP)		5.4						
& 0	Air Inlet								
stin	(PVB)								
ĭ	Shuton valve #1. In right - Leaking - Replaced - Shuton valve #2.							ed	
	Backpressure:		□ No			ABPA:	ASSE:		
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L	AKE HOA	Garrett Brag	galone,	303-678-7677				
ion	Alarm Company/Fir	re Departme	nt:			DFS Cer	tification #:		
Notification	Person Notified:				Contacted By:				
Noti	Turn Off Date/Time	e:			Turn On Date/Time:				
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	furned to pre-test o	orientation.	
Tester	Testing Company: Tester Name: Scott		Sackflow LLC	<i></i>		Phone: 303-875-499	 6		
ř		L. Constag						10th 2019	
	Signature:					Certificate Expiration [	Jaie. <u>June 3</u>	30th, 2018	



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # 166297						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Bac	Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)								
ınt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 67	700 OWL I	AKE DRIV	<u>'E</u>				. <u> </u>	
۷	Contact Person:								
	Make: WATTS		LF009M2Q		Type of Use	<u>Protection</u>		Orienta	ation
			VB □ Air C	3ap					
bly		ate Installed	:		<u></u> Domestic	Containment	Inlet		Outlet
Assembly	■ New ☐ Existing	-			□Fire □ Glycol	☐ Containment by Isola	tion 🔳	Horizo	ntal 💻
As	Previous Assembly	y # <u>: H45672</u>			Irrigation	☐ Isolation		Vertical	IUp □
	Location: OUTSIDI	E NORTH W	/ALL		□ Recycled				Down 🖵
									Y • N 🗆
	Line		t Results		F	Repairs			Results
	PSI: 60 Check Valve #1	Tigntness	Differential					tness Leak	Differential
	(RP, DC, PVB)	■ Tight	8.8					Tight	
	Check Valve #2	☐ Leak	TIGHT					Leak	
a)	(RP, DC)	Tight	_					Tight	
Testing & Maintenance	Relief Valve (RP)		3.1						
	Buffer		5.7						
. Mai	(RP)		5.7						
ng 8	Air Inlet							=	
estiı	(PVB)								
_	Shutoff Valve #1:					Valve #2: ■ Tight □ Le		Replac	ed
	Backpressure:		□ No			ABPA:	□ ASSE:		
	Comments: Be s				-				
	Contractor: OWL L	AKE HOA	Garrett Brac	galone,	303-678-7677				
tion	Alarm Company/Fir	re Departme	nt:			DFS	Certification	n # <u>:</u>	
Notification	Person Notified:		-		Contacted By:				
Noti	Turn Off Date/Time	): 			Turn On Date/Time:				
Kit	Test Kit Make: Mi	idwest			Model: 845-5				
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28th, 2018				
	Tester certifies this at Testing Company:	•			e listed procedure and	verifies the isolation valves well	re returned to p	ore-test o	rientation.
Tester	Tester Name: Scott		COMING LEG	-		Phone: 303-875-	4996		
	Signature:	•	/			Certificate Expiration		June 3	0th, 2018

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969. Customer verifies SOV returned to original positions:X\_\_\_\_\_\_SOV#1\_<u>0/0</u>\_SOV#2\_<u>0/0</u>



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # J089514						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 67	715 OWL I	AKE DRIV	E					
٧	Contact Person:								
	Make: FEBCO	Model:	825Y		Type of Use	Protection	Orienta	ation	
	, _		VB □ Air C	∂ар					
ply		ate Installed	:		<u></u> ☐,Domestic	Containment	<u>Inlet</u>	Outlet	
Assembly	☐ New ■ Existing				□Fire □ Glycol	☐ Containment by Isolation			
As	Previous Assembly				Irrigation	☐ Isolation	☐ Vertica	ıl Up □	
	Location: LEFT SID	DE OF HOU	SE BY HOT	TUB	□ Recycled		☐ Vertical		
							Approved:		
	Line PSI: 45		t Results Differential		F	Repairs		Results Differential	
	Check Valve #1	☐ Leak	8.2			•	☐ Leak	Dilleterillar	
	(RP, DC, PVB)	■ Tight	0.2				☐ Tight		
	Check Valve #2	☐ Leak	TIGHT				□ Leak		
e	(RP, DC)	■ Tight					☐ Tight		
Testing & Maintenance	Relief Valve (RP)		2.1						
	Buffer		6.1				_		
& Ma	(RP)		0.1						
ing	Air Inlet								
Test	(PVB) Shutoff Valve #1:	.⊐ Tight □	Looking □	Ponlac	od Shutoff	Valve #2: ■ Tight □ Leaki	ng □ Replac	rod	
	Backpressure:		□ No				ASSE:	,eu	
	Comments: Be s		_						
	Contractor: OWL L				<u> </u>				
				, ,					
Notification	Alarm Company/Fi	re Departme	nt:		011		rtification #:		
otific	Person Notified: —				Contacted By:				
ž	Turn Off Date/Time	): 			Iurn Or	n Date/Time:			
Kit	Test Kit Make: Mi	idwest			Model:	Model: 845-5			
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28th, 2018				
	Tester certifies this at Testing Company:	•			e listed procedure and	verifies the isolation valves were re	turned to pre-test o	orientation.	
Tester	Tester Name: Scott			-		Phone: 303-875-499	<del></del> 6		
_		1. Compley	/			Certificate Expiration [		30th, 2018	
	Signature: Certificate Expiration Date:								



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # J09451						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Bac	Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)								
nt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 67	720 OWL I	AKE DRIV	'E					
Ă	Contact Person:								
	Make: FEBCO	Model:			Type of Use	Protection_	Orienta	ation	
	, _		VB □ Air C	∃ap					
yldı		ate Installed	:		☐,Domestic	■ Containment	Inlet	Outlet	
Assembly	☐ New ■ Existing				□Fire □ Glycol	☐ Containment by Isolation			
Ä	Previous Assembly				Irrigation	☐ Isolation	☐ Vertica	l Up 🔲	
	Location: FRONT (	OF HOUSE			□ Recycled		□ Vertical		
							Approved:	***************************************	
	Line PSI: 60		t Results Differential		F	Repairs	Re-Test	Results Differential	
	Check Valve #1	∏ Leak	8.2			•		8.2	
	(RP, DC, PVB)	■ Tight	0.2			■ Tight	0.2		
	Check Valve #2	Leak	LEAK		REPLACED	BROKEN CHECK		TIGHT	
e	(RP, DC)	্রী Tight					■ Tight		
Testing & Maintenance	Relief Valve (RP)		2.0					3.0	
	Buffer		6.2					5.2	
k Ma	(RP)		0.2						
ing	Air Inlet								
Test	(PVB)	.⊐ Tight □	Looking	Donloo	od Chutoff	Volvo #2: - Tight	ng Poples	and	
·	Shutoff Valve #1:  Backpressure:		□ No			Valve #2: ■ Tight □ Leakir ABPA: □ A	ng □ Replac ASSE:	eu	
	·		_						
	Comments: Be sure to provide adequate drainage.  Contractor: OWL LAKE HOA Garrett Bragalone, 303-678-7677								
	Contractor. OWE E	ARETIOA	Canca Dia	gaioric,	303-070-7077				
tion	Alarm Company/Fir	re Departme	nt:			DFS Cer	tification #:		
Notification	Person Notified:				Contacted By:				
Not	Turn Off Date/Time	): 			Turn Or	n Date/Time:			
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	urned to pre-test c	rientation.	
Tester	Testing Company: Tester Name: Scott		Sackflow LLC	<u>,                                      </u>		Phone: 303-875-4996			
Ţ	-	Campbell						10th 2040	
	Signature:	- anjeug				Certificate Expiration D	vale: <u>June 3</u>	0th, 2018	



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # J005185						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 67	735 OWL I	AKE DRIV	<u>'E</u>					
V	Contact Person:								
	Make: FEBCO	Model:	825Y		Type of Use	<u>Protection</u>	Orienta	ation	
	, _		VB □ Air C	Sap			<u>Onomic</u>	ation .	
ply		ate Installed	:		<u></u> Domestic	Containment	Inlet	Outlet	
Assembly	☐ New ■ Existing				□Fire □ Glycol	☐ Containment by Isolation			
As	Previous Assembly	-			Irrigation	☐ Isolation	☐ Vertica	l Up □	
	Location: NEXT TO	METER			□ Recycled		☐ Vertical		
							Approved:		
	Line PSI: 65		t Results Differential		F	Repairs		Results Differential	
	Check Valve #1	∏ Leak	8.6				☐ Leak	Directential	
	(RP, DC, PVB)	<u> </u>	0.0				□ Tight		
	Check Valve #2	☐ Leak	TIGHT				☐ Leak		
ce	(RP, DC) Relief Valve	■ Tight	2.4				☐ Tight		
Testing & Maintenance	(RP)		2.1						
	Buffer		6.5						
8 M	(RP)								
ting	Air Inlet (PVB)								
Tes	Shutoff Valve #1:	<u>l</u> ☑ Tight □	Leaking □	Replac	ed Shutoff	Valve #2: ■ Tight □ Leakii	ng □ Replac	ed	
	Backpressure:		□ No				ASSE:		
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L	AKE HOA	Garrett Bra	galone,	303-678-7677				
uo	Alarm Company/Fire Department: DFS Certification #:								
Notification	Person Notified:				Contacted By:				
Notif	Turn Off Date/Time	): 			Turn On Date/Time:				
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	furned to pre-test o	orientation.	
Tester	Testing Company: Tester Name: Scott		Sackflow LLC			Phone: 303-875-499	<u> </u>		
ř		L. Constag						10th 2019	
	Signature:					Certificate Expiration [	Jaie. <u>June 3</u>	30th, 2018	



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # 174993								
Test Date / Time 5/6/2019								
Tester Certification # 06-00020								
Assembly Test Results X Pass *Fail								
Under Suspension - Process Immediately								

Bac	Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)								
nt	Water Supplier: District: Meter #:								
Account	Facility Address: 67	745 OWL I	AKE DRIV	<u>'E</u>					
<	Contact Person:								
	Make: WATTS		009M2QT		Type of Use	Protection	Orienta	ation	
	, =	DC DP	VB □ Air C	3ap		<u> </u>			
bly		ate Installed	:		<u>□</u> Domestic	Containment	<u>Inlet</u>	Outlet	
Assembly	☐ New ■ Existing	9			☐Fire ☐ Glycol	☐ Containment by Isolation	Horizo	ntal 👤	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	Vertica	ıl Up □	
	Location: OUTSIDI	E NE CORN	ER		□ Recycled		□ Vertical	Down □	
							Approved:	Y <b>■</b> N □	
	Line		st Results		F	Repairs		Results	
	PSI: 50		Differential			Сорино	•	Differential	
	Check Valve #1 (RP, DC, PVB)	☐ Leak ■ Tight	7.1				☐ Leak □ Tight		
	Check Valve #2	Leak	TIGHT				Leak		
	(RP, DC)	■ Tight	110111				Tight		
ance	Relief Valve		3.0						
Testing & Maintenance	(RP)								
	Buffer (RP)		4.1						
8	Air Inlet								
stin	(PVB)								
ĭ	Shutoff Valve #1:					Valve #2: ■ Tight □ Leaki	• •	ed	
	Backpressure:	Yes	□ No	Test	Procedure: X A	ABPA:	NSSE:		
	Comments: Be s	ure to provid	e adequate	draina	ge.				
	Contractor: OWL L	AKE HOA	Garrett Braç	galone,	303-678-7677				
ion	Alarm Company/Fi	re Departme	nt:			DFS Cer	tification #:		
Notification	Person Notified:				Contacted By:				
Notif	Turn Off Date/Time	e:			Turn On Date/Time:				
Kit	Test Kit Make: M	idwest			Model:	845-5			
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	urned to pre-test o	orientation.	
Tester	Testing Company: Tester Name: Scott		Sackflow LLC	,		Phone: 303-875-499	 ก		
ř		•	/					20th 2019	
	Signature:Certificate Expiration Date:								



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # 122135						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier:	FIRESTO	NE Di	strict:		Meter	#:		
Account	Facility Address: 67	750 OWL I	AKE DRIV	E					
٧	Contact Person:								
	Make: WATTS	Model:	009M2QT		Type of Use	<u>Protection</u>	Orienta	ation	
	,		VB □ Air C	€ap					
ply		ate Installed	:		<u></u> Domestic	Containment	Inlet_	Outlet	
Assembly	☐ New ■ Existing				□Fire □ Glycol	☐ Containment by Isolation			
As	Previous Assembly	y # <u>:                                    </u>			Irrigation	☐ Isolation	☐ Vertica	l Up □	
	Location: OUTSIDI	E EAST WA	LL		□ Recycled		□ Vertical		
		-					Approved:		
	Line PSI: 60		t Results		F	Repairs		Results Differential	
	Check Valve #1	⊓ Leak	Differential 7.5			'	☐ Leak	Dillerential	
	(RP, DC, PVB)	■ Tight	7.5				□ Tight		
	Check Valve #2	☐ Leak	TIGHT				☐ Leak		
e	(RP, DC)	■ Tight					☐ Tight		
Testing & Maintenance	Relief Valve (RP)		2.3						
	Buffer		5.2						
k Ma	(RP)		3.2						
ing 8	Air Inlet								
Test	(PVB)	.⊐ Tight □	Looking	Donloo	od Chutoff	Volvo #2: - Tight	na 🗆 Donlar	and	
·	Shutoff Valve #1:  Backpressure:		□ No			Valve #2: ■ Tight □ Leakii ABPA: □ A	ng □ Replac \SSE:	eu	
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L								
	Contractor: CVVL L	THE HOTE	Canca Dia	jaiorio,	000 070 7077				
Notification	Alarm Company/Fir	re Departme	nt:			DFS Cer	tification #:		
tifica	Person Notified:				Contacted By:				
No	Turn Off Date/Time	e:			Turn Or	n Date/Time:			
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943					libration Date: November 28	<sup>th</sup> , 2018		
		•			e listed procedure and	verifies the isolation valves were ret	urned to pre-test o	orientation.	
Tester	Testing Company: Tester Name: Scott		Sackflow LLC			Phone: 303-875-499	<u> </u>		
Te	-	Campbell						10th 2010	
	Signature:					Certificate Expiration [	Jaile: <u>June 3</u>	30th, 2018	



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # H34997						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
ınt	Water Supplier:	FIRESTO	NE Di	strict:			Meter #:		
Account	Facility Address: 67	755 OWL I	AKE DRIV	<u>Έ</u>					
٩	Contact Person:								
	Make: FEECO	Model:	860		Type of Use	Protection		Orienta	ation
	Type: 🔳 RP 🔻	DC DP	VB □ Air C	Sap				<u>01101110</u>	2011
bly	Size: 1" Da	ate Installed	:		<u>□</u> Domestic	Containment		nlet	Outlet
Assembly	☐ New ■ Existing	9			□Fire □ Glycol	☐ Containment by Iso	olation	Horizo	ntal 🔳
As	Previous Assembly	y #:			Irrigation	Isolation		☐ Vertica	I Up □
	Location: OUTSIDI	E BETWEEN	N HOUSE &		□ Recycled			□ Vertical	Down 🖵
	STREET SURROL	JNDED BY E	BUSHES					Approved:	Y <b>■</b> N □
	Line		st Results		F	Repairs			Results
	PSI: 60 Check Valve #1	PSI: 60 Tightness Differential			•	topano		Tightness ☐ Leak	Differential
	(RP, DC, PVB)	☐ Leak ■ Tight	7.3					☐ Leak	
	Check Valve #2	☐ Leak	TIGHT					☐ Leak	
Testing & Maintenance	(RP, DC)	Tight						☐ Tight	
	Relief Valve		2.2						
	(RP) Buffer		F 4						
Mai	(RP)		5.1						
g &	Air Inlet								
estir	(PVB)				-				
_	Shutoff Valve #1:					Valve #2: ■ Tight □			ed
	Backpressure:		□ No			ABPA:	□ AS	SE:	
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L	AKE HOA	Garrett Brac	galone,	303-678-7677				
ion	Alarm Company/Fir	re Departme	nt:			DF	S Certific	cation #:	
Notification	Person Notified:				Contacted By:				
Noti	Turn Off Date/Time	): 			Turn On Date/Time:				
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28th, 2018				
	Tester certifies this at Testing Company:	•			e listed procedure and	verifies the isolation valves v	were return	ed to pre-test o	rientation.
Tester	Tester Name: Scott		JONNOW LLC			Phone: 303-87	5-4996		
_	Signature:		/			Certificate Expira		e: <u>June 3</u>	0th, 2018
						·			

Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # A239719						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier:	FIRESTO	NE Di	strict:		Meter	#:		
Account	Facility Address: 67	760 OWL I	AKE DRIV	<u>'E</u>					
Ă	Contact Person:								
	Make: FEECO	Model:	825Y		Type of Use	Protection_	Orienta	ation	
		DC DP	VB □ Air C	Зар		<del></del>	<u> </u>	<u> </u>	
bly		ate Installed	:		<u>□</u> Domestic	Containment	<u>Inlet</u>	Outlet	
Assembly	☐ New ■ Existing	9			☐Fire ☐ Glycol	☐ Containment by Isolation	Horizo	ntal -	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	Vertica	l Up □	
	Location: OUTSIDI	E SOUTH W	/ALL		□ Recycled		Vertical		
							Approved:		
	Line		t Results		F	Repairs		Results	
	PSI: 50 Check Valve #1	Tigntness ☐ Leak	Differential 6.1			- r	☐ Leak	Differential	
	(RP, DC, PVB)	■ Tight	0.1				☐ Tight		
	Check Valve #2	☐ Leak	TIGHT				☐ Leak		
a)	(RP, DC)	■ Tight					☐ Tight		
Testing & Maintenance	Relief Valve (RP)		2.1						
	Buffer		4.0						
k Ma	(RP)		4.0						
gu §	Air Inlet								
Festi	(PVB)				1 101 . "	VI "0 TIL EL I			
	Shutoff Valve #1:		Leaking ⊔  ☐ No			Valve #2: ■ Tight □ Leakir	-	ea	
	Backpressure: ☐ Yes ☐ No Test Procedure: X ABPA: ☐ ASSE:  Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L								
	Contractor. OWL L	ARLTIOA	Carrett Dia(	gaiorie,	303-070-7077				
tion	Alarm Company/Fi	re Departme	nt:			DFS Cer	tification #:		
Notification	Person Notified:				Contacted By:				
Not	Turn Off Date/Time	):			Turn Or	n Date/Time:			
Kit	Test Kit Make: M	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	urned to pre-test o	orientation.	
Tester	Testing Company:		Backflow LL(	<u>ی</u>		Dhana: 202.075.4000			
Te	Tester Name: Scott	•				Phone: 303-875-4996		201 2012	
	Signature:	L. Compley				Certificate Expiration D	oate: <u>June 3</u>	30th, 2018	



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # J137382						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Bac	ktlow Assembly T	est & Maint	enance Re	oort (p	lease print with <b>B</b>	LOCK LETTERING)			
ınt	Water Supplier: _	FIRESTO	NE Di	strict:		Meter	· #:		
Account	Facility Address: 6765 OWL LAKE DRIVE								
	Contact Person:								
	Make: FEBCO	Model:			Type of Use	<u>Protection</u>	Orienta	ation	
			VB □ Air C	∃ap					
bly		ate Installed	:		<u></u> Domestic	Containment	<u>Inlet</u>	Outlet	
Assembly	■ New ☐ Existing				☐Fire ☐ Glycol	☐ Containment by Isolation	<ul><li>Horizo</li></ul>	ntal 🔳	
As	Previous Assembly	/ #: J11603 <sup>^</sup>	1		Irrigation	☐ Isolation	☐ Vertica	ıl Up □	
	Location: OUTSIDI	SE CORN	ER		□ Recycled		Vertical		
	_						Approved:	Y <b>■</b> N □	
	Line		st Results		F	Repairs		Results	
	PSI: 60 Check Valve #1	Tightness	Differential		•		Tightness ☐ Leak	Differential	
	(RP, DC, PVB)	☐ Leak ■ Tight	7.4				☐ Tight		
	Check Valve #2	Leak	TIGHT				☐ Leak		
	(RP, DC)	_ ■ Tight	110111				 ☐ Tight		
Testing & Maintenance	Relief Valve		2.0						
	(RP)								
Mair	Buffer (RP)		5.4						
<b>୬</b> ୪ ପ	Air Inlet								
stin	(PVB)								
ř	Shuton valve #1. I right   Leaking   Replaced   Shuton valve #2.   Inght   Leaking   Replaced							ed	
	Backpressure:	Yes	□ No	Test	Procedure: X A	ABPA: □ /	ASSE:		
	Comments: Be s	ure to provid	le adequate	drainag	ge.				
	Contractor: OWL L	AKE HOA	Garrett Bra	galone,	303-678-7677				
ion	Alarm Company/Fir	e Departme	nt:			DFS Ce	rtification #:		
Notification	Person Notified:				Contacted By:				
Noti	Turn Off Date/Time	e:			Turn On Date/Time:				
Ķ	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28th, 2018				
	Tester certifies this a	•			e listed procedure and	verifies the isolation valves were re	turned to pre-test o	orientation.	
Tester	Tester Name: Scott		DAUNIIUW LLU			Phone: 303-875-499	6		
F	Signature:		/			Certificate Expiration [		30th, 2018	
		·				•			

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969. Customer verifies SOV returned to original positions:X\_\_\_\_\_\_SOV#1\_<u>O/O</u>\_SOV#2\_<u>O/O</u>



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # 270925						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Bac	kflow Assembly T	est & Maint	enance Re	oort (p	lease print with <b>B</b>	LOCK LETTERING)			
Water Supplier: FIRESTONE District: Meter							eter #:		
Account	Facility Address: 90	005 OWL I	AKE DRIV	<u>'E</u>					
۷	Contact Person:								-
	Make: WATTS		009M3QT		Type of Use	<u>Protection</u>	0	rientatio	n
	, <u> </u>		VB □ Air C	∃ap					_
bly		ate Installed	:		<u>□</u> Domestic	Containment	Inlet		Outlet
Assembly	☐ New ■ Existing	9			□Fire □ Glycol	□ Containment by Isolat	tion 🔳 H	orizonta	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	□ Ve	ertical U	p 🗆
	Location: OUTSIDI	E NORTH W	/ALL		□ Recycled		☐ Ver	tical Do	wn 🖵
							Appro	ved: Y	<b>■</b> N □
	Line		t Results		F	Repairs		Test Re	
	PSI: 98 Check Valve #1	Ü	Differential		·	topano	I ightr   ⊟ Le		ferential
	(RP, DC, PVB)	☐ Leak ■ Tight	7.9				D Li		
	Check Valve #2	☐ Leak	TIGHT					•	
Testing & Maintenance	(RP, DC)	■ Tight	110111				<del>□</del> Ti		
	Relief Valve		2.1						
	(RP) Buffer								
Mai	(RP)		5.8						
8 6	Air Inlet								
estin	(PVB)								
ř	Shutoff Valve #1:					Valve #2: ■ Tight □ Le		eplaced	
	Backpressure:		□ No			ABPA:	□ ASSE:		
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L	AKE HOA	Garrett Bra	galone,	303-678-7677				
ion	Alarm Company/Fi	re Departme	nt:			DFS	Certification #	<u> </u>	
Notification	Person Notified:				Contacted By:				
Noti	Turn Off Date/Time	e:			Turn On Date/Time:				
Kit	Test Kit Make: M	idwest			Model:	845-5			
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28th, 2018				
	Tester certifies this a Testing Company:	•			e listed procedure and	verifies the isolation valves were	e returned to pre	test orier	ntation.
Tester	Tester Name: Scott		DAURITOW LLC	<u>,                                      </u>		Phone: 303-875-4	1996		
_	Signature:	•	/			Certificate Expiration		ine 30th	, 2018
							-		



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # A146950
Test Date / Time 5/6/2019
Tester Certification # 06-00020
Assembly Test Results X Pass *Fail
Under Suspension - Process Immediately

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
ınt	Water Supplier:	FIRESTO	NE Di	strict:			Meter #:		
Account	Facility Address: 90	010 OWL I	AKE DRIV	<u>'E</u>					
٩	Contact Person:								
	Make: FEBCO	Model:			Type of Use	<u>Protection</u>		Orienta	ation
	Type: 🗓 RP 🔃	DC DP	VB □ Air C	∃ap					
bly	Size: <u>.75"</u> Da	ate Installed	:		<u>□</u> ,Domestic	Containment	_!	Inlet	Outlet
Assembly	☐ New ■ Existing	g			□Fire □ Glycol	□ Containment by Is	olation	<ul><li>Horizo</li></ul>	ntal 💻
As	Previous Assembly	y #:			<ul><li>Irrigation</li></ul>	Isolation		☐ Vertica	I Up □
	Location: UNDER	ROCK SOU	TH OF		□ Recycled			□ Vertical	Down 🖵
	DRIVEWAY							Approved:	Y <b>■</b> N □
	Line		st Results		<u>.                                      </u>	Repairs		Re-Test	
	PSI: 65 Check Valve #1		Differential		·	· · · · · · · · · · · · · · · · · · ·		Tightness ⊟ Leak	Differential
	(RP, DC, PVB)	☐ Leak ■ Tight	2.0					☐ Leak	
	Check Valve #2	Leak	2.0					☐ Leak	
	(RP, DC)	Tight	2.0					☐ Tight	
Testing & Maintenance	Relief Valve								
	(RP) Buffer								
Mai	(RP)								
s gu	Air Inlet								
estir	(PVB)								
1	Shutoff Valve #1:					Valve #2: ■ Tight □			ed
	Backpressure:		□ No	1		ABPA:	□ AS	SE:	
	Comments: Be s				-				
	Contractor: OWL L	AKE HOA	Garrett Brag	galone,	303-678-7677				
ion	Alarm Company/Fi	re Departme	nt:			DI	FS Certifi	cation #:	
Notification	Person Notified:				Contacted By:				
Noti	Turn Off Date/Time	):			Turn On Date/Time:				
Kit	Test Kit Make: M	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28th, 2018				
	Tester certifies this a	•			e listed procedure and	verifies the isolation valves	were return	ed to pre-test o	rientation.
Tester	Tester Name: Scott		JOHNOW LLC			Phone: 303-87	75-4996		
	Signature:	•	/			Certificate Expir		e: <u>June 3</u>	0th, 2018
	L								

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969. Customer verifies SOV returned to original positions:X\_\_\_\_\_\_SOV#1\_<u>0/0</u>\_SOV#2\_<u>0/0</u>

Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # J014929						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier: FIRESTONE District:Meter #:								
Account	Facility Address: 90	035 OWL I	AKE DRIV	<u>'E</u>					
×	Contact Person:								
	Make: FEBCO	Model:			Type of Use	Protection	Orienta	ation	
	, _		VB □ Air C	€ap		<del></del>			
bly		ate Installed	:		□Domestic	Containment	Inlet_	Outlet	
Assembly	☐ New ■ Existing	9			☐Fire ☐ Glycol	☐ Containment by Isolation	Horizo	ntal 🔳	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	Vertica	I Up □	
	Location: OUTSIDI	E EAST WA	LL		□ Recycled		Vertical	Down 🖵	
							Approved:	Y <b>■</b> N □	
	Line		st Results		F	Repairs		Results	
	PSI: 95		Differential			Сорино	•	Differential	
	Check Valve #1 (RP, DC, PVB)	☐ Leak ■ Tight	8.8				☐ Leak □ Tight		
	Check Valve #2	Leak	TIGHT				Leak		
	(RP, DC)	■ Tight	110111				Tight		
Testing & Maintenance	Relief Valve		3.0						
ten	(RP)								
Mair	Buffer (RP)		5.8						
& D	Air Inlet								
stin	(PVB)								
Te	Shaton valve #1. [1 right   Leaking   Nephaced   Shaton valve #2.   right   Leaking							ed	
	Backpressure:	Yes	□ No	Test	Procedure: X A	ABPA: □ A	ASSE:		
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL LAKE HOA Garrett Bragalone, 303-678-7677								
ion	Alarm Company/Fir	re Departme	nt:			DFS Cer	tification #:		
Notification	Person Notified:				Contacted By:				
Notii	Turn Off Date/Time	e:			Turn On Date/Time:				
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	urned to pre-test o	rientation.	
Tester	Testing Company: Tester Name: Scott		Backflow LLC	<i>)</i>		Phone: 303-875-499	<u> </u>		
Ţ	-	Campbell						10th 2040	
	Signature:	- anjeug				Certificate Expiration D	vale: <u>June 3</u>	0th, 2018	

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969. Customer verifies SOV returned to original positions:X\_\_\_\_\_\_SOV#1\_<u>0/0</u>\_SOV#2\_<u>0/0</u>



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # A268468						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Bac	Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
Water Supplier: Meter #:										
Account	Facility Address: 90	040 OWL I	AKE DRIV	<u>'E</u>						
۷	Contact Person:									
	Make: FEECO	Model:			Type of Use	<u>Protection</u>		Orienta	ation	
	, <u> </u>		VB □ Air C	∃ap						
ıbly		ate Installed	:		<u></u> Domestic	Containment	_	nlet	Outlet	
Assembly	☐ New ■ Existing	_			□Fire □ Glycol	☐ Containment by Iso	olation	<ul><li>Horizo</li></ul>		
As	Previous Assembly	y #:			Irrigation	☐ Isolation		☐ Vertica	ıl Up □	
	Location: OUTSIDI	E NE CORN	ER		□ Recycled			□ Vertical		
								Approved:		
	Line		st Results		F	Repairs			Results	
	PSI: 70 Check Valve #1	Tigntness ☐ Leak	Differential					•	Differential 8.2	
	(RP, DC, PVB)	■ Tight	8.2						0.2	
	Check Valve #2	Leak	TIGHT					■ Tight  □ Leak	TIGHT	
a)	(RP, DC)	■ Tight	_					Tight		
Testing & Maintenance	Relief Valve 0				CLEANED				3.1	
	(RP) Buffer		8.2						5.1	
	(RP)		8.2						5.1	
ng 8	Air Inlet									
estiı	(PVB)									
_	Shutoff Valve #1:				ed Shutoff Procedure: X	Valve #2: ■ Tight □	Leaking	•	ed	
	Backpressure:		□ No			ABPA:	⊔ A53	DE:		
	Comments: Be s				-					
	Contractor: OWL L	AKE HOA	Garrett Brac	gaione,	303-678-7677					
tion	Alarm Company/Fi	re Departme	nt:			DF	S Certific	cation #:		
Notification	Person Notified:		•		Contacted By:					
Noti	Turn Off Date/Time	):			Turn On Date/Time:					
Kit	Test Kit Make: M	idwest			Model:	845-5				
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28 <sup>th</sup> , 2018					
	Tester certifies this a Testing Company:	•			e listed procedure and	verifies the isolation valves v	were returne	ed to pre-test o	orientation.	
Tester	Tester Name: Scott		ZGORIOW ELC			Phone: 303-87	5-4996			
	Signature:	•	/			Certificate Expira		e: <u>June 3</u>	30th, 2018	

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969. Customer verifies SOV returned to original positions:X\_\_\_\_\_\_SOV#1\_<u>0/0</u>\_SOV#2\_<u>0/0</u>



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # H00004						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 90	065 OWL I	AKE DRIV	'E					
×	Contact Person:								
	Make: FEBCO	Model:			Type of Use	Protection	Orienta	ation	
	,	DC DP	VB □ Air C	∃ap		<u> </u>			
bly		ate Installed	:		<u>□</u> ,Domestic	Containment	<u>Inlet</u>	Outlet	
Assembly	☐ New ■ Existing	9			☐Fire ☐ Glycol	☐ Containment by Isolation	<ul><li>Horizo</li></ul>	ntal 💻	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	Vertica	l Up □	
	Location: OUTSIDI	E NEAR ME	TER		□ Recycled		Vertical	Down □	
							Approved:	Y <b>■</b> N □	
	Line		st Results		<u>.                                      </u>	Repairs		Results	
Testing & Maintenance	PSI: 95 Check Valve #1		Differential		•		Tightness	Differential	
	(RP, DC, PVB)	☐ Leak ■ Tight	6.6				☐ Leak		
	Check Valve #2	☐ Leak	TIGHT				☐ Leak		
	(RP, DC)	Tight	110111				☐ Tight		
	Relief Valve		2.2						
ıten	(RP) Buffer								
Mair	(RP)		4.4						
& 0	Air Inlet								
stin	(PVB)								
<b>1</b>	Shutoff Valve #1:					Valve #2: ■ Tight □ Leaki	• •	ed	
	Backpressure:		□ No			ABPA: □ A	ASSE:		
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L	AKE HOA	Garrett Bra	galone,	303-678-7677				
ion	Alarm Company/Fir	re Departme	nt:			DFS Cer	tification #:		
Notification	Person Notified:	·			Contacted By:				
Notii	Turn Off Date/Time	e:			Turn On Date/Time:				
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	furned to pre-test o	orientation.	
Tester	Testing Company: Tester Name: Scott		Backflow LLC	<i>)</i>		Phone: 303-875-499	<u> </u>		
ř	-	L. Constag						10th 2010	
	Signature:					Certificate Expiration [	Date: <u>June 3</u>	30th, 2018	

Testing Company: Submit by e-mail (preferred) to CrossConnectionControl@denverwater.org, type "Backflow Test Reports" in the subject line OR submit by Fax to (303) 794-8325.

\*FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969. Customer verifies SOV returned to original positions:X\_\_\_\_\_\_SOV#1\_<u>0/0</u>\_SOV#2\_<u>0/0</u>



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # H51895						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 90	070 OWL I	AKE DRIV	<u>'E</u>					
×	Contact Person:								
	Make: FEBCO	Model:	825Y		Type of Use	Protection	Orienta	ation	
		DC DP	VB □ Air C	Зар		<u> </u>	<u> </u>	<u></u>	
bly		ate Installed	:		<u>□</u> ,Domestic	Containment	<u>Inlet</u>	Outlet	
Assembly	☐ New ■ Existing	9			□Fire □ Glycol	☐ Containment by Isolation	Horizo	ntal 🔳	
As	Previous Assembly	y #:			<ul><li>Irrigation</li></ul>	☐ Isolation	Vertica	l Up □	
	Location: R. OF FF	RONT DOOF	R IN PIT		□ Recycled		Vertical	Down □	
							Approved:	Y <b>■</b> N □	
	Line		st Results		F	Repairs		Results	
	PSI: 65 Check Valve #1	Tightness ☐ Leak	Differential		•	topuno	Tightness	Differential	
	(RP, DC, PVB)	■ Tight	7.3				☐ Leak		
	Check Valve #2	☐ Leak	TIGHT				☐ Leak		
	(RP, DC)	Tight	110111				☐ Tight		
Testing & Maintenance	Relief Valve		2.1						
nten	(RP) Buffer								
Mai	(RP)		5.3						
8 6	Air Inlet								
estin	(PVB)								
Ť	Shutoff Valve #1:					Valve #2: ■ Tight □ Leaki	• •	ed	
	Backpressure: ☐ Yes ☐ No ☐ Test Procedure: X ABPA: ☐ ASSE:								
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL L	AKE HOA	Garrett Brac	galone,	303-678-7677				
ion	Alarm Company/Fire Department: DFS Certi						tification #:		
Notification	Person Notified:				Contacted By:				
Noti	Turn Off Date/Time	e:			Turn On Date/Time:				
Kit	Test Kit Make: M	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28 <sup>th</sup> , 2018				
		•			e listed procedure and	verifies the isolation valves were ret	furned to pre-test o	orientation.	
Tester	Testing Company: Tester Name: Scott		Backflow LLC	<i>.</i>		Phone: 303-875-499	<u> </u>		
ĭ		L. Constag						10th 2010	
	Signature:					Certificate Expiration [	Date: <u>June 3</u>	30th, 2018	

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969.

Customer verifies SOV returned to original positions:X\_\_\_\_\_\_\_SOV#1\_0/0\_SOV#2\_0/0\_



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # H01604							
Test Date / Time 5/6/2019							
Tester Certification # 06-00020							
Assembly Test Results X Pass *Fail							
Under Suspension - Process Immediately							

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
Ħ	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 90	095 OWL I	AKE DRIV	E					
<	Contact Person:								
	Make: FEBCO	Model:			Type of Use	Protection_	Orienta	ation	
	, _		VB □ Air C	Зар					
bly		ate Installed	:		<u>□</u> Domestic	Containment	<u>Inlet</u>	Outlet	
Assembly	☐ New ■ Existing	9			☐Fire ☐ Glycol	☐ Containment by Isolation	Horizo	ntal	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	Vertica	l Up □	
	Location: OUTSIDI	E BETWEEN	N HOUSE &		□ Recycled		Vertical	Down □	
	STREET						Approved:	Y <b>■</b> N □	
	Line		st Results		<u> </u>	Repairs		Results	
	PSI: 60		Differential			·····		Differential	
	Check Valve #1 (RP, DC, PVB)	☐ Leak ■ Tight	6.7				☐ Leak □ Tight		
	Check Valve #2	Leak	TIGHT				Leak		
	(RP, DC)	■ Tight	110111				 ☐ Tight		
Testing & Maintenance	Relief Valve		2.2						
ten	(RP)								
Mair	Buffer (RP)		4.5						
& D	Air Inlet								
stin	(PVB)								
Te	Shuton valve #1. [1 hight   Leaking   Nephaceu   Shuton valve #2.   Inght   Leaking							ed	
	Backpressure:	Yes	□ No	Test	Procedure: X A	ABPA: □ A	ASSE:		
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL LAKE HOA Garrett Bragalone, 303-678-7677								
ion	Alarm Company/Fir	re Departme	nt:			DFS Cer	tification #:		
Notification	Person Notified:				Contacted By:				
Notii	Turn Off Date/Time	e:			Turn On Date/Time:				
Kit	Test Kit Make: Mi	idwest			Model:	845-5			
Test Kit	Serial #: 10111943				Last Calibration Date: November 28th, 2018				
		•			e listed procedure and	verifies the isolation valves were ret	urned to pre-test o	orientation.	
Tester	Testing Company: Tester Name: Scott		Sackflow LLC	<u>,                                      </u>		Phone: 303-875-4996	<u> </u>		
ř		L. Constag						10th 2019	
	Signature:					Certificate Expiration D	vale. <u>June 3</u>	30th, 2018	

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969.

Customer verifies SOV returned to original positions:X\_\_\_\_\_\_\_SOV#1\_0/0\_SOV#2\_0/0\_



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # A165814							
Test Date / Time 5/6/2019							
Tester Certification # 06-00020							
Assembly Test Results X Pass *Fail							
Under Suspension - Process Immediately							

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)									
nt	Water Supplier: FIRESTONE District: Meter #:								
Account	Facility Address: 92	100 OWL I	AKE DRIV	E					
٧	Contact Person:								
	Make: FEBCO	Model:	825Y		Type of Use	<u>Protection</u>	Orienta	ation	
	, _		VB □ Air C	∃ap					
ply		ate Installed	:		<u></u> Domestic	Containment	Inlet_	Outlet	
Assembly	☐ New ■ Existing				☐Fire ☐ Glycol	☐ Containment by Isolation	<ul><li>Horizo</li></ul>	ntal 🔳	
As	Previous Assembly	y #:			Irrigation	☐ Isolation	☐ Vertica	l Up □	
	Location: OUTSIDI	E NE CORN	ER		□ Recycled		□ Vertical		
							Approved:		
	Line PSI: 60		t Results		F	Repairs		Results Differential	
	Check Valve #1	⊓gniness	Differential 6.8			'	☐ Leak	Dillerential	
	(RP, DC, PVB)	■ Tight	0.0				□ Tight		
	Check Valve #2	☐ Leak	TIGHT				☐ Leak		
e	(RP, DC)	■ Tight					☐ Tight		
Testing & Maintenance	Relief Valve (RP)		2.1						
inte	Buffer		4.7				-		
& Ma	(RP)		/						
ing 8	Air Inlet								
Test	(PVB) Shutoff Valve #1:	.⊐ Tight □	Looking □	Poplac	od Chutoff	Valve #2: ■ Tight □ Leakii	ng □ Replac	and	
	Backpressure:		□ No				ilg ⊔ Kepiac ASSE:	,eu	
	Comments: Be sure to provide adequate drainage.								
	Contractor: OWL LAKE HOA Garrett Bragalone, 303-678-7677								
				<i>y</i> ,					
Notification	Alarm Company/Fi	re Departme	nt:		<u> </u>		tification #:		
otific	Person Notified: —				Contacted By:				
ž	Turn Off Date/Time	): 			Iurn Or	n Date/Time:			
Kit	Test Kit Make: Mi	idwest			Model: 845-5				
Test Kit	Serial #: 10111943	3			Last Calibration Date: November 28 <sup>th</sup> , 2018				
	Tester certifies this at Testing Company:	•			e listed procedure and	verifies the isolation valves were ret	turned to pre-test of	orientation.	
Tester	Tester Name: Scott		DACKIIOW LLC			Phone: 303-875-499	 6		
ř		L. Constag	/			Certificate Expiration [		30th, 2018	
	olgitataro					OCTUINORIO EXPIRATION E	zato. <u>Julie c</u>	70til, 2010	

nced **B**ackflow

Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # H11417						
Test Date / Time 5/6/2019						
Tester Certification # 06-00020						
Assembly Test Results X Pass *Fail						
Under Suspension - Process Immediately						

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)										
nt	Water Supplier: FIRESTONE District:					Meter #:				
Account	Facility Address: 9130 OWL LAKE DRIVE									
	Contact Person:									
Assembly	Make: HBCO Model: 825Y				Type of Use Protection		<u>Orientation</u>			
	, _		VB □ Air C	∃ap		<u> </u>				
	Size: 75" Date Installed:				<u></u> Domestic	Containment	Inlet_	Outlet		
	□ New ■ Existing				☐Fire ☐ Glycol	☐ Containment by Isolation	Horizo	ntal <u> </u>		
	Previous Assembly #:				Irrigation	☐ Isolation	☐ Vertica	ıl Up □		
	Location: OUTSIDI	E NORTH W	/ALL		□ Recycled		□ Vertical			
							Approved:			
Testing & Maintenance	Line Initial Test Results PSI: 60 Tightness Differential				F		Results Differential			
	PSI: 60 Check Valve #1	⊓ Leak	8.3			'	☐ Leak	Dinerential		
	(RP, DC, PVB)	■ Tight	0.3				□ Tight			
	Check Valve #2	☐ Leak	TIGHT				☐ Leak			
	(RP, DC)	■ Tight					☐ Tight			
	Relief Valve (RP)		2.2							
inte	Buffer		6.1							
& Ma	(RP)		0.1							
ing 8	Air Inlet									
Test	(PVB)	.⊐ Tight □	Looking	Donloo	od Chutoff	Volvo #2: - Tight	na 🗆 Poplas	and and		
·	Shutoff Valve #1:  Backpressure:	Valve #2: ■ Tight □ Leakii ABPA: □ A	ng □ Replac ASSE:	eu						
	·		□ No	1		1017.	1001.			
	Comments: Be sure to provide adequate drainage.  Contractor: OWL LAKE HOA Garrett Bragalone, 303-678-7677									
	Contractor: CVVE E	71112 11071	Carrott Braç	gaiorio,						
Notification	Alarm Company/Fire Department: DFS Certification									
tifica	Person Notified:				Contacted By:					
No	Turn Off Date/Time:				Turn On Date/Time:					
Kit	Test Kit Make: Midwest				Model: 845-5					
Test Kit	Serial #: 10111943				Last Calibration Date: November 28 <sup>th</sup> , 2018					
	Tester certifies this assembly has been tested with the above listed procedure and verifies the isolation valves were returned to pre-test orientation.									
Tester	Testing Company: Advanced Backflow LLC Tester Name: Scott Campbell				Phone: 303-875-4996					
	Signature: _ day ( Carlly					Certificate Expiration Date: June 30th, 2018				
	Testing Company Otherither well (referred) 4. C. C. H.									

<sup>\*</sup>FAILED test results must be reported to Denver Water within 24 hours of failure at (303) 628-5969.

Customer verifies SOV returned to original positions:X\_\_\_\_\_\_\_SOV#1\_0/0\_SOV#2\_0/0\_



Certified Backflow Testing, Repair & Installation

4550 W. 90th Ave., Westminster, CO 80031 Phone: 303-427-5556 Fax: 303-427-5532

Assembly Serial # A256652							
Test Date / Time 5/6/2019							
Tester Certification # 06-00020							
Assembly Test Results X Pass *Fail							
Under Suspension - Process Immediately							

Backflow Assembly Test & Maintenance Report (please print with BLOCK LETTERING)										
nt	Water Supplier: FIRESTONE District:					Meter #:				
Account	Facility Address: 9160 OWL LAKE DRIVE									
⋖	Contact Person:									
Assembly	Make: PECO Model: 825Y				Type of Use	Orienta	Orientation			
	, _		VB □ Air C	∃ap		<u>Protection</u>				
	Size: 1" Date Installed:				<u></u> Domestic	Containment	<u>Inlet</u>	Outlet		
	□ New  ■ Existing				☐Fire ☐ Glycol	☐ Containment by Isolation	<ul><li>Horizo</li></ul>	ntal 🔳		
	Previous Assembly	y #:			Irrigation	☐ Isolation	☐ Vertica	l Up □		
	Location: OUTSIDI	E SE CORN	ER		□ Recycled		Vertical	Down 🖵		
							Approved:	Y <b>■</b> N □		
	Line Initial Test Results				<u> </u>		Re-Test Results			
Testing & Maintenance	PSI: 60		Differential			Repairs	•	Differential		
	Check Valve #1 (RP, DC, PVB)	☐ Leak ■ Tight	6.9				☐ Leak □ Tight			
	Check Valve #2	Leak	TIGHT				Leak			
	(RP, DC)	■ Tight	110111				Tight			
	Relief Valve		2.3							
ten	(RP)									
Mair	Buffer (RP)		4.6							
& D	Air Inlet									
stin	(PVB)									
Te	Shutoff Valve #1: ☐ Tight ☐ Leaking ☐ Replaced Shutoff Valve #2: ■ Tight ☐ Leaking ☐ Replaced									
	Backpressure: ☐ Yes ☐ No ☐ Test Procedure: X ABPA: ☐ ASSE:									
	Comments: Be sure to provide adequate drainage.									
	Contractor: OWL L	AKE HOA	Garrett Bra	galone,	303-678-7677					
ion	Alarm Company/Fire Department: DFS Certification #:									
Notification	Person Notified:				Contacted By:					
Noti	Turn Off Date/Time:				Turn On Date/Time:					
Kit	Test Kit Make: Midwest				Model: 845-5					
Test Kit	Serial #: 10111943				Last Calibration Date: November 28th, 2018					
	Tester certifies this assembly has been tested with the above listed procedure and verifies the isolation valves were returned to pre-test orientation.									
Tester	Testing Company: Advanced Backflow LLC Tester Name: Scott Campbell				Phone: 303-875-4996					
	Signature: _ Scott Campbell									
	Signature:Certificate Expiration Date:									