



Backflow Assembly Test Form Report User Guide



Effective Date: June 2020

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AN OVERVIEW OF BACKFLOW PREVENTION ASSEMBLY TEST REPORT

The Backflow Assembly Test Form (BATF) Report is an interactive online form that allows Backflow Testers the ability to submit backflow tests automatically to WaterOne. The form performs various front-end validations that will display error messages if the tester attempts to submit invalid test data. If additional review and/or comments require attention, WaterOne staff will receive an email in their DWQ group inbox indicating that a review is needed. The email will include all the test information, any errors that occurred and any contact or tester information that was input.

BATF ENTRY

Form Type and Location

1. The new BATF form is located on the www.waterone.org/your-water/preventing-backflow website or directly at <https://forms.waterone.org> . At this point in time, the automated Adobe BATF is only being used for ANNUAL test types. New, Replace or Remove assemblies require a separate form found at www.waterone.org/home/showdocument?id=229 .

The old Backflow Test Form will be phased out after approximately 1 month of the new form being online. No faxed forms will be allowed after the old form has been taken offline.

Form Entry

Steps – Opening Fields

The screenshot shows the 'Backflow Assembly Test Form' page. At the top, there are fields for 'Notification #' and 'Manufacturer'. Below these, a 'NOTIFICATION #' field contains the value '16206180'. To the right of this field is a 'reCAPTCHA' box with the text 'I'm not a robot' and a 'Search' button. A callout box to the left of the 'Notification #' field says 'Check this box (required)'. A callout box to the right of the 'reCAPTCHA' box says 'Press 'Search' to continue'. Another callout box at the top right says 'If Notification # is not known, a manufacturer search can be performed'. A large callout box at the bottom right says 'Download the current notification list'. A callout box on the left side of the page says 'New, Remove or Replace assemblies should utilize these links. The new form is only for tests on current equipment.' Arrows from these callout boxes point to the respective fields and buttons on the form.

1. **Notification:** *Required.* Must be 8 digits. SAP validation requires that the details submitted in the form match the open Notification with this number in SAP.

2. **Recaptcha:** *Required.* This box must be selected in order to search for the notification number.

Steps – Manufacturer Search

Backflow Assembly Test Form

Notification #	Manufacturer
MANUFACTURER <input type="text" value="Select an option"/>	
ASSEMBLY TYPE <input type="text" value="Select an option"/>	
MODEL <input type="text"/>	
SERIAL # <input type="text"/>	
<input type="button" value="Search"/>	

If not an annual Test, please select one of the following:

Alternative Search Method by Manufacturer information

Select Manufacturer from dropdown list (required)

Select Assembly Type from dropdown list (required)

Select Model Number from dropdown list (required)

Input Serial Number from the assembly (required)

Select "Search" after all data has been input

1. **Manufacturer:** *Required.* This text field requires the manufacturers' name (i.e., Febco, Ames, etc.)
2. **Assembly Type:** *Required.* This text field requires the assembly type (i.e. DCDA, RPA, etc.)
 - RPA (Reduced Pressure Assembly)

- RPDA (Reduced Pressure Detector Assembly)
- RPDA-II (Reduced Pressure Detector Assembly Type II)
- DCA (Double Check Assembly)
- DCDA (Double Check Detector Assembly)
- DCDA-II (Double Check Detector Assembly Type II)
- PVB (Pressure Vacuum Breaker)
- SPVB (Spill-Resistant Pressure Vacuum Breaker)
- AG (Air Gap)

3. **Model:** *Required.* Please input the model number as it appears on the assembly.
4. **Serial Number:** *Required.* Please input the serial number as it appears on the assembly.
5. **Search:** When all fields have been filled out, select the search button.

Steps – Verify Location and Assembly Information

Once a successful search has been executed, the below image will appear. Please review the information on the left hand side of the screen for correct information. If assembly data needs minor modification, please utilize the “information on the left is incorrect” check box. If the incorrect assembly and location is displayed, you may also choose to “Redo Search” and verify that the correct notification or assembly information was utilized. Otherwise, select “OK” if all the data is correct. No other functions are allowed until this popup box has been resolved. If this is a new/removed/replaced assembly, please utilize the correct form on the initial screen.

1. **Notification #:** Please verify that the notification number is correct.
2. **Customer Name:** Please ensure that the customer name has not changed and is correct.
3. **Service Address:** Please ensure that the assembly service address and City is correct.
4. **Assembly Information:** Please ensure that all information regarding the assembly is correct including the *Serial #, Type of Assmebly, Manufacturer, Model, Size, Hazard and Location.*

The screenshot shows a user interface for a BATF Form. On the left, there is a 'Customer Information' section with fields for NOTIFICATION # (16225583), CUSTOMER NAME (SC INDUSTRIAL V LLC), SERVICE ADDRESS (11225 COLLEGE BLVD), and CITY (OVERLAND PARK). Above this section is a 'Return to search' button. To the right is a 'Certified Tester Information' section with a text input field for CERTIFICATION #, which contains the placeholder 'Enter Number and hit tab or select another box'. Below this are fields for Tester Name (N/A), Company Name (N/A), Company Phone (--), and Certificate Expiration Date (--). A note at the bottom of this section says 'Please contact our office if any of your contact information has recently changed.' A blue callout box in the top right corner says 'Verify all Customer information on the left side of screen'.

Below the Customer Information section is an 'Assembly Information' section with fields for SERIAL # (10275), TYPE OF ASSEMBLY (Doub. Check Detector), MANUFACTURER (AMES), MODEL (2000B), SIZE (0.75), HAZARD (DETECTOR ASSEMBLY), and LOCATION (SPRINKLER RM). To the right of this section is a 'Passing Backflow Assembly Test' section. Inside this section is a 'Verify Information' dialog box with the text 'Please verify the information on the left is accurate. If not, please click the "Incorrect Information" button.' It contains three buttons: 'OK', 'Redo Search', and 'Incorrect Information'. A blue callout box to the right of this dialog says 'Verify all Assembly information on the left side of screen'.

At the bottom of the assembly information section is a 'Remove Assembly' button. Below the assembly information section are 'Reset Form' and 'Submit' buttons. A blue callout box to the right of the 'Incorrect Information' button says 'Select the appropriate button after the information has been reviewed'.

If the information is incorrect, please select the "Incorrect Information" button and describe what must be modified. Please only utilize this option if minor changes are required. See the below example where the serial number was off by only a single number. If the assembly is completely different, a new, removed or replaced form will need to be completed.

NOTIFICATION #	16225583
CUSTOMER NAME	SC INDUSTRIAL V LLC
SERVICE ADDRESS	11225 COLLEGE BLVD
CITY	OVERLAND PARK

CERTIFICATION #	<input type="text"/>
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Enter Number and hit tab or select another box

Tester Name: N/A
Company Name: N/A
Company Phone: --
Certificate Expiration Date: --

Please contact our office if any of your contact information has recently changed.

Assembly Information

SERIAL #
10275
TYPE OF ASSEMBLY
Doub. Check Detector
MANUFACTURER
AMES
MODEL
2000B
SIZE
0.75

HAZARD
DETECTOR ASSEMBLY
LOCATION
SPRINKLER RM

Passing Backflow Assembly Test

Test Date	<input type="text"/>
PSID	<input type="text"/>
Check Valve 1	0.0
Check Valve 2	0.0

Check this box if the information on the left is incorrect

The Serial Number should be 10275

The Serial Number was incorrect so an updated number was put into the text box. If it's a new device, please use the replace assembly form to the left.

[Remove Assembly](#)

[Replace Assembly](#)

[Reset Form](#)

[Submit](#)

Steps – Input Tester and Test information

This section allows the tester's information and test results to be entered. Depending on which assembly type is associated with the notification, the appropriate test boxes and fire flushing will appear and be required information in order to submit the test form.

1. **Certification # for the tester:** *Required.* Please input the tester's certification number including any dashes or spaces that are required. Hit tab or select another box once the information is input. The tester's information should automatically populate. Please utilize the MO DNR number if available.
2. **Test Date:** *Required.* The date that the test was completed is required in this box. Test date can be no earlier than 30 days before the notification date.
3. **Check Valves:** *Required.* Data from the test regarding the check valves are input into these boxes. The value should reflect the pressure differential (PSID) that is observed during the test. If the test values are outside the allowable values according to USC Guidance, then the test will not be admissible. The max allowable sum per USC guidelines (Valve #1 & #2) PSID value for DCA assemblies is 10 PSID and 25 PSID for RPA style assemblies.
4. **Fireline Flushing acknowledgement:** *Required.* Please input the name of the tester that performed the fireline flushing and the date in on which it occurred. Please note that a minimum time for the flushing will be displayed as determined by each assembly's unique installation. The check box below the name should also be selected.
5. **'Check' box for incorrect information:** Only select this box if information needs to be updated for the tester, address or assembly information. New, Replacement or Removed assemblies should utilize the proper form found on www.waterone.org/your-water/preventing-backflow website.



Customer Information

NOTIFICATION #
16236090

CUSTOMER NAME
GOMERS OF KANSAS

SERVICE ADDRESS
17200-40 W 87TH ST PKWY

CITY
LENEXA

[Return to search](#)

Certified Tester Information

CERTIFICATION #
33-

Enter Number and hit tab or select another box

Tester Name: **[Redacted]**

Company Name: **LANDWORKS INC**

Company Phone: **--**

Certificate Expiration Date: **09/30/2022**

Please contact our office if any of your contact information has recently changed.

Assembly Information

SERIAL #
F4474

TYPE OF ASSEMBLY
DC Detector II

MANUFACTURER
BACKFLOW DIRECT

MODEL
DERINGER 30

SIZE
4.0

HAZARD
FIRE PROTECTION / PRIVATE FH

LOCATION
NW CORNER OF BACK ROOM

Test Date
04/30/2020

PSID

Check Valve 1
2

Check Valve 2
2

Bypass Valve
1

DCDA Type II assemblies require pressure readings for the two primary check valves and for the bypass valve

Fireline Flushing Acknowledgement
(Flushing time must be at least 3 minutes)

NAME
Water One Test

I acknowledge fire flush completed

Check this box if the information on the left is incorrect

FIRELINE FLUSH DATE
04/30/2020

Select this box to acknowledge the fire flushing requirement has been completed

[Remove Assembly](#) [Replace Assembly](#)

[Reset Form](#) [Submit](#)

Steps – Fireline Flushing

This section opens up for entry when the Type of Assembly selected is RP, RPDA, DC or DCDA and fire line flushing is required.

1. **Date:** *Required if the Fireline Flushing 'Name' field is updated, and will only open for entry if the Assembly Type is RP, RPDA, DC or DCDA.* Please select date from the popup calendar.
2. **Name:** *Required if the Fireline Flushing 'Date' field is updated, and will only open for entry if the Assembly Type is RP, RPDA, DC or DCDA.* The 'Name' field should be populated with the first and last name of the flushing technician.

Steps – Passing Backflow Assembly Test Results

1. **Main Check Valve 1:** *Required for all RP, RPDA, DC or DCDA tests.* The value entered must at least 1.0 if Assembly is DC or DCDA, or at least 5.0 if Assembly is RP or RPDA. If incorrect value is entered, the user will receive an error message.
2. **Main Check Valve 2:** *Required for all RP, RPDA, DC or DCDA tests.* The value entered must be at least 1.0. If the incorrect value is entered, the user will receive an error message.
3. **Relief Valve:** *Required for all RP or RPDA tests.* The value entered must be at least 2.0. In addition, the Check Valve #1 value less the Relief Valve value must be at least 2.0. If incorrect value is entered, the user will receive an error message.
4. **By-Pass Check Valve:** *Required for DCDA-Type II Assemblies.* The value entered must at least 1.0. If the incorrect value is entered, the user will receive an error message.
5. **Air Inlet Opened At:** *Required for all PVB or SPVB tests.* The value entered must be at least to 1.0.
6. **Check Valve Held At:** *Required for all PVB or SPVB tests.* The value entered must at least to 1.0.
7. **Supply Pipe Diameter:** *Required for all AG tests.*
8. **Gap:** *Required for all AG tests.* Value entered must be two times the Supply Pipe Diameter and 1" at a minimum.

Steps – Submission

1. **Submit Button:** This is the final step in the submission process.
2. **Reset Form:** Press the Reset Form button to clear out all form fields.

Tips:

- ❖ No annual test submissions will be allowed via email, phone or fax. All submissions must be through the website. New, removed or replaced should utilize the appropriate form on the www.waterone.org/your-water/preventing-backflow web page.
- ❖ All questions about the form or issues with submitting should come through the 913-895-1815 phone number or the dwq@waterone.org email address.

- ❖ No email will be sent if the submitted test is accepted. After submission, a message will appear that says, "Thank you for your submission".
- ❖ Google Chrome has produced the most consistent results for web browsers and please avoid using Internet Explorer (doesn't work well). If you are having issues press CTRL+F5 to refresh your browser.
- ❖ The max allowable sum per USC guidelines (Valve #1 & #2) PSID value for DCA assemblies is 10 PSID and 25 PSID for RPA style assemblies.
- ❖ Only an eight digit notification number is needed. No check digit required. (16228234, not 1622834-2)
- ❖ Tab is utilized between fields, don't hit enter.