

Rapidly applied vacuum - In compliance? Yes No Questionable
If questionable, explain: _____

Check fouled per Figure _____ Other _____
Explain: _____

The maximum rise of the meniscus in the sight glass was _____ inches
(_____ mm)

TESTING AGENCY _____

ADDRESS _____

PHONE: _____ FAX: _____

TEST ENGINEER(S) _____

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 agency: _____

Title of the official: _____ Date: _____

Signature and seal of the Registered Professional Engineer supervising the laboratory evaluation:

Signature

