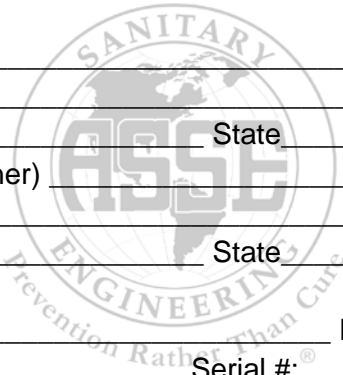


ASSE International

Pressure Vacuum Breaker Assembly (PVB)

ASSE Standard #1020 Field Test Report



Owner of Property _____
 Address _____
 City _____ State _____ Zip Code _____
 Occupant of Property (if different from owner) _____
 Occupant Address _____
 City _____ State _____ Zip Code _____
 Manufacturer of Assembly: _____ Model #: _____
 Size of Assembly: _____ Serial #: _____
 Location of Assembly and Equipment or System Application: _____

Test Equipment:
 Manufacturer: _____ Model #: _____ Serial #: _____
 Calibration Date: _____
 Date test was performed: _____ Time test was performed: _____ Static Line Pressure: _____

	Air Inlet Valve	Check Valve	Shut Off #2
Initial Test	Failed to Open _____ Opened at _____ psid	Leaking () Closed Tight () Pressure Drop Across Check Valve #1 _____ psid	Leaking () Closed Tight ()
Describe parts and repairs when needed			
Final Test	Opened at _____ psid	Leaking () Closed Tight () Pressure Drop Across Check Valve #1 _____ psid	Leaking () Closed Tight ()

Certified Tester (print) _____
 Address _____
 City _____ State _____ Zip _____
 Phone #: _____
 License #: _____ Certification # _____

Assembly Final Test Performance

Pass
 Fail

Signature _____ **Date:** _____

Comments or Recommendations (continue to other side, if needed): _____

