

**American Society of Sanitary Engineering
Seal (Certification) Program**

**Factory Audit Inspection Test for:
Trap Seal Primer Valves - Potable Water Supplied**

Tested for compliance to ASSE Standard #1018

Revised: February, 2001

Factory Audit Inspection Test

Manufacturer _____

Model No. _____

Address _____

Serial No. _____

Other Identification Markings _____

Size _____

Connections (screwed, flanged, etc.) _____

3.2 Cycle Test

Was the device installed per manufacturer's standard installation? Yes No

What was the pressure utilized? _____ kPa (_____ psi)

How many cycles were used? _____

Was there any leakage during the test? Yes No

In compliance? Yes No

3.4 Back Siphonage

(a) Apply intermittent vacuum at 635mm (25 inches) or more mercury column. Record the water rise in the sight glass: _____ mm (_____ inches) of mercury.

(b) Apply intermittent vacuums at the following levels and record the water rise in mm (inches) of mercury.

Level 1 - 53 mm (2 inches) _____ mm (_____ inches).

Level 2 - 127 mm (5 inches) _____ mm (_____ inches).

Level 3 - 254 mm (10 inches) _____ mm (_____ inches).

Level 4 - 361 mm (15 inches) _____ mm (_____ inches).

Level 5 - 635 mm (25 inches) _____ mm (_____ inches).

(c) Apply instantaneous vacuum at 635 mm (25 inches) of mercury column to establish surge effect.

Record the water rise in the sight glass: _____ mm (_____ inches).

(d) Slowly apply steadily increasing vacuum from 0 mm to 635 mm (0 inches to 25 inches) mercury column:

Record the water rise in the sight glass _____ mm (_____ inches).

Slowly apply steadily decreasing vacuum from 635 mm to 0 mm (25 inches).

Were there any water rises above 76.2 mm (3 inches) in any of the above tests?

Yes No

TESTING AGENCY _____

ADDRESS _____

PHONE: _____ FAX: _____

TEST ENGINEER(S) _____

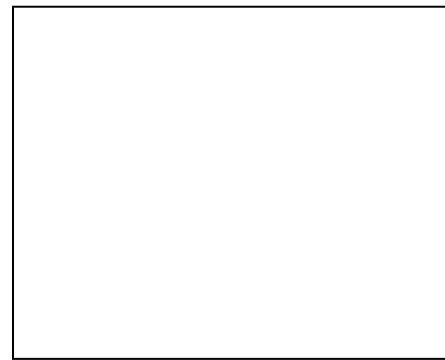
We certify that the evaluations are based on our best judgments and that the test data recorded is an accurate record of the performance of the device on test.

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



Seal