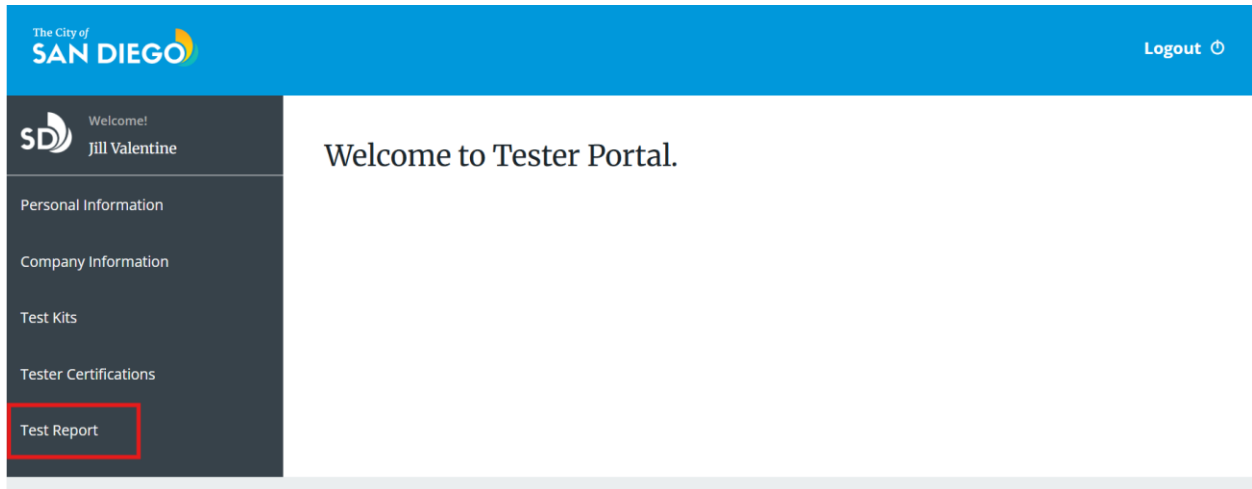


#3 Test Report Submission

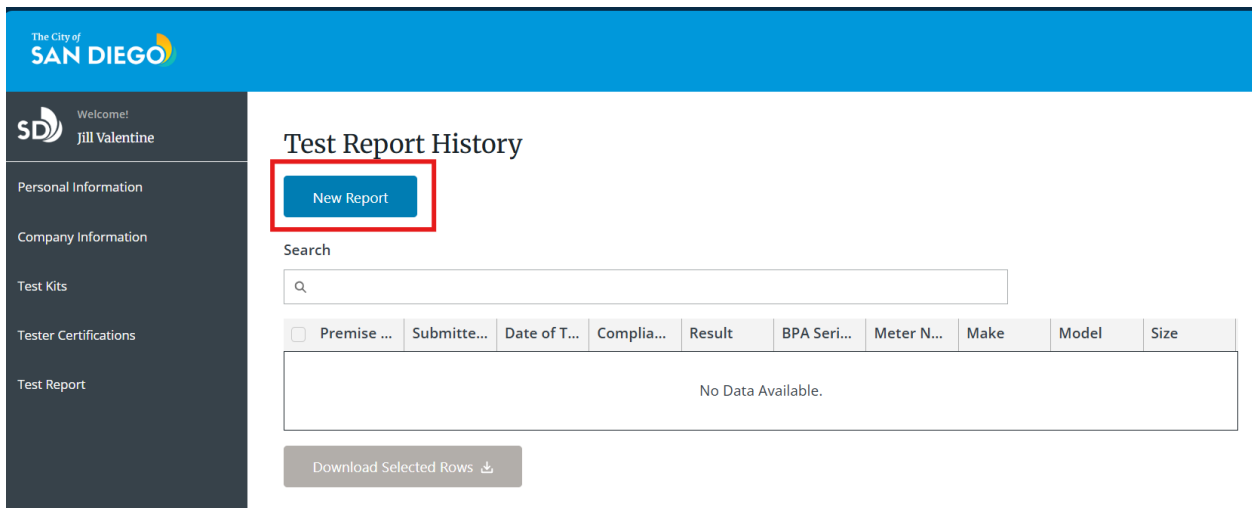
THIS GUIDE SHOWS THE USER HOW TO SUBMIT A TEST REPORT
VIA THE TESTER PORTAL.

1 Submit a Test Report from the Tester Portal

1. Log into the Tester Portal and click “Test Report” navigation item.



2. Click 'New Report' button.



3. Select a lookup method in the Search Type field and enter in the corresponding lookup information in the below field. You can search by BPA Serial Number, Premise Address, or Meter Number. In the below example, the search is done by Meter Number.

The City of
SAN DIEGO

Premise Selection

Search Type

Meter Number ▾

BPA Serial Number

Premise Address

✓ Meter Number

The City of
SAN DIEGO

Premise Selection

Search Type

Meter Number ▾

Meter Number *

4. Fill out the information on the Tester Information screen, then click the 'Next' button.

Tester Information

Company Name *
Q \$49 Pass 2 Pay Backflow

Tester Name *
Q Jill Valentine

Test Kit *
Q 4567894187635

Point of Contact *
Mike Shinoda

Point of Contact Phone *
(235) 908-2352

Point of Contact Email *
mshinoda@gmail.com.invalid

Next >

5. On the Device List screen, select the device for which the test report is being completed, then click the 'Next' button.

The City of SAN DIEGO Logout

Device List

Serial Number	Meter Number	Device Type	Compliant	Make	Model	Size	GPS Coordinates	GPS Comments	Compliance Ex...
<input type="radio"/> 4878758	FS-DET	RP	✓	Wilkins/Zurn	975XL2	.75	0, 0		2026-01-31
<input checked="" type="radio"/> 0434M	FS	RPDA	✓	Wilkins/Zurn	475STDA	8	0, 0		2026-01-31

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Next >

6. Fill out the fields on the Test Information screen, then click the 'Next' button.

The City of
SAN DIEGO

Test Information

Date of Test *
12/4/2025

Device Location *
Behind tree

GPS Coordinates * ⓘ
0, 0

Line Pressure at Time of Test
3

Comments

Protection Type
Containment

Hazard Level
High

To the best of your knowledge, has any NEW or modified equipment, system, or process been installed at the premises that could create an actual or potential cross-connection? *
No

No

Is the assembly currently protecting the highest degree of hazard present at the site? *
Yes

Is the backflow prevention assembly a replacement for the currently selected device? * ⓘ
No

BPA Serial Number *
0434M

Size *
8

Make *
Wilkins/Zurn

Model *
475STDA

Meter Number *
FS

Is the Meter number correct? *
Yes

Remarks *
No remarks

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Next >

- a. For hazard assessment-related questions, there may be conditional fields displayed, prompting user to provide more information, as necessary.

To the best of your knowledge, has any NEW or modified equipment, system, or process been installed at the premises that could create an actual or potential cross-connection? *

No

Are there any visible cross-connections before the meter? *

Yes

Describe the location and nature of the cross connection *

Cross connection between building 1 and building 2.

Is the backflow prevention assembly installed per city standards? *

Yes

- 7. Continue to fill out the fields on the Test Information screen, then click the 'Next' button.
 - a. If "Did you clean or make repairs to the backflow assembly?" is answered with "No," then the Initial Test Reading Confirmation screen will be displayed next.

The City of SAN DIEGO

Test Information

CV1 Held at Apparent PSID * 5 CV1 Held at Actual PSID * 5

CV1 Closed Tight or Leaked * Closed Tight

CV2 Held at PSID * 3 CV2 Closed Tight or Leaked * Closed Tight

Shut-Off Valve 2 Closed Tight or Leaked * Closed Tight

Relief Valve Opened at PSID * 5 Did Not Open

Did you clean or make repairs to the backflow assembly? * No

Upload Documents * Or drop files

Screenshot 2025-12-11 103546.png

Description * No notes

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- b. If “Did you clean or make repairs to the backflow assembly” is answered with “Yes,” then the Repairs and Final Test screen will be displayed next. Provide additional information related to repairs, then click the ‘Next’ button.

The City of
SAN DIEGO

Repairs and Final Test

CV1 Repairs Made *	CV2 Repairs Made *
<input type="text" value="Yes"/>	<input type="text" value="Yes"/>
Shut-Off Valve 2 Repairs Made *	Relief Valve Repairs Made *
<input type="text" value="Yes"/>	<input type="text" value="Yes"/>
Repair Date *	Repairer
<input type="text" value="12/5/2025"/>	<input type="text" value="Leon Kennedy"/>
Repairer Phone	Repairer Email
<input type="text" value="(135) 093-1259"/>	<input type="text" value="lkennedy@gmail.com.invalid"/>
Repair Test Kit Make	Repair Test Kit Model
<input type="text" value="Oblek"/>	<input type="text" value="Topaz"/>
Repair Test Kit Calibration Date	
<input type="text" value="12/31/2025"/>	
Final Test Date *	
<input type="text" value="12/8/2025"/>	
CV1 PSID *	CV1 Closed Tight or Leaked *
<input type="text" value="5"/>	<input type="text" value="Closed Tight"/>
CV2 PSID *	CV2 Closed Tight or Leaked *
<input type="text" value="5"/>	<input type="text" value="Closed Tight"/>
Relief Valve Opened at PSID *	Shut-Off Valve 2 Closed Tight or Leaked *
<input type="text" value="5"/>	<input type="text" value="Closed Tight"/>
Final Tester Name *	Final Tester Phone *
<input type="text" value="Jill Valentine"/>	<input type="text" value="(239) 058-3408"/>
Final Tester Email *	Final Test Kit Make *
<input type="text" value="opfijapiubg@sharklasers.com"/>	<input type="text" value="TESTER MAX"/>
Final Test Kit Model *	Final Test Kit Calibration Date *
<input type="text" value="902834"/>	<input type="text" value="12/6/2028"/>

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- On the Initial Test Reading Confirmation screen, certify that the initial test information is correct, then click the 'Submit' button.

Initial Test Reading Confirmation

CV1 Held At Apparent PSID: 5

CV1 Held At Actual PSID: 5

CV1 Closed Tight or Leaked: Closed Tight

CV2 Held at PSID: 3

CV2 Closed Tight or Leaked: Closed Tight

Relief Valve Opened at PSID: 5

Shut-Off Valve 2 Closed Tight or Leaked: Closed Tight

Did Not Open

* I certify that the information in this report is true, complete, and accurate.

Electronic Signature *
Jill Valentine

[< Previous](#) [Submit](#)

2 Submit a Test Report from the C3 Portal

- Log into C3 portal as a PW Inspector or Supervisor.
- Navigate to one of the following tabs: Premises, Backflow Prevention Assemblies, or Test Reports
- Click the 'New' button.

Test Reports

Recently Viewed

16 items • Updated a few seconds ago

Search this list...

Test Report Name	Status	BPA Serial Number	Result	Compliance
1 TRP-771522	Pending Review	082109	Fail	✗
2 TRP-771554	Pending Review	ACQ6841	Fail	✗
3 TRP-771527	Pending Review	4803275	Fail	✗
4 TRP-771541	Approved	N10920	Fail	✗
5 TRP-771535	Pending Review	4803275	Fail	✗
6 TRP-771521	Approved	4803275	Fail	✗
7 TRP-771518	Approved	380040	Pass	✓
8 TRP-703722	Approved	A02812	Pass	✓
9 TRP-771496	Approved	J006985	Fail	✗

[New](#)

4. Fill out the required fields and click the 'Save' button.

New Test Report: Test Report Record Type

* = Required Information

General

Next Test Due At Acceptance Format: 12/31/2024 * Date Of Test

Property Info

* Premise Search Premises... * Point Of Contact Phone

* Point Of Contact * Point Of Contact Email

BPA Info

5. To clone a Test Report, navigate to a Test Report record and click the 'Clone' button.

Test Report **TRP-771521**

Details Related

General

Test Report Name	TRP-771521	Date Of Test	3/26/2026	
Next Test Due At Acceptance		Result	Fail	
		Accepted Date	3/26/2026	
		Rejected Date		

Property Info

Premise	6101371806	Location Name	COLE, ALFRED	
Location Account	6101371806	Address	1041 VAN NUYS ST	
		Point Of Contact	(740) 994-7162	

Test Discrepancies (0)

Work Guide

You have no assigned work items for this record.

Activity

- Information from the cloned Test Report will appear on the Test Report input form, which makes creating similar Test Reports more efficient. Modify information in any fields which should be updated for the latest Test Report, then click the 'Save' button.

Rejected Date

Property Info

Premise	<input type="text" value="6101371806"/>	Location Name	COLE, ALFRED <i>This field is calculated upon save</i>
Location Account Number	6101371806 <i>This field is calculated upon save</i>	Address	1041 VAN NUYS ST <i>This field is calculated upon save</i>
Point Of Contact	<input type="text" value="Alex Torre"/>	Point Of Contact Phone	<input type="text" value="(240) 994-7162"/>
		Point Of Contact Email	<input type="text" value="customer_poc@inboxbear.com"/>

BPA Info

Backflow Prevention Assembly	<input type="text" value="System-ID-10424"/>	C3 Meter Number	<input type="text" value="61291543"/>
BPA Serial	<input type="text" value="4803275"/>		