

**ASSE International
Product (Seal) Listing Program**

ASSE 1019-2011(R2016)

Performance Requirements for Wall Hydrant with Backflow Protection and Freeze Resistance

Manufacturer: _____

Contact Person: _____ **E-mail:** _____

Address: _____

Laboratory: _____ **Laboratory File Number:** _____

Model # Tested: _____

Model Size: _____

Additional models report applies to: _____

Additional Model Information (i.e. orientation, series, end connections, shut-off valves)

Date models received by laboratory: _____ **Date testing began:** _____

Date testing was completed _____

If models were damaged during shipment, describe damages:

Prototype or production sample? _____

Were all tests performed at the selected laboratory? Yes No

If offsite, identify location: _____

General information and instructions for the testing engineer:

The results within this report apply only to the models listed above.

There may be items for which the judgment of the test engineer will be involved. Should there be a question of compliance with that provision of the standard, a conference with the manufacturer should be arranged to enable a satisfactory solution of the question.

Should disagreement persist and compliance remain in question by the test agency, the agency shall, if the product is in compliance with all other requirements of the standard, file a complete report on the questionable items together with the test report, for evaluation by the ASSE Seal Control Board. The Seal Control Board will then review and rule on the question of compliance with the intent of the standard then involved.

Documentation of material compliance must be furnished by the manufacturer. The manufacturer shall furnish to the testing agency, a bill of material which clearly identifies the material of each part included in the product construction. This identification must include any standards which relate thereto.

Section III

3.0 Performance Requirements and Compliance Testing

3.1 Hydrostatic Pressure Tests

3.1.2 Procedure

What pressure the test pressure? _____ psi (_____ kPa)

What was the water temperature used for this test? _____ °F (_____ °C)

How long was the pressure held for? _____ minutes

3.1.3 Criteria

Was there any indication of damage or external leakage?

Yes No Questionable

If yes or questionable, explain _____

Is the device in compliance with this section?

Yes No Questionable

If no or questionable, explain _____

3.3 Deterioration at Maximum Rated Temperature and Pressure

3.3.2 Procedure

What was the flow rate used for this test? _____ GPM (_____ L/min)

What was the water temperature used for this test? _____ °F (_____ °C)

What was the pressure used for this test? _____ psi (_____ kPa)

What was the duration of the test?

_____ hours/day for _____ days OR _____ continuous hours

3.6 Self-Draining Capabilities

3.6.2 Procedure

What type is the device?

Type "A" "Type B" Type "C"

What was the water pressure used for this test? _____ psi (_____ kPa)

What was the water temperature used for this test? _____ °F (_____ °C)

What was the temperature inside the cold chamber while running the test?

_____ °F (_____ °C)

What was the time required to lower the device to 0.0°F (-17.8°C)? _____ minutes

3.6.3 Criteria

Once the temperature of the device inside the cold chamber was lowered to a maximum of 0.0°F (-17.8°C), was the device able to flow water?

Yes No Questionable

If no or questionable, explain _____

Is the device in compliance with this section?

Yes No Questionable

If no or questionable, explain _____

3.8 Outlet Pressure Release for Type A and Type B Devices

3.8.2 Procedure

What was the system pressurized to? _____ psi (_____ kPa)

What was the inlet pressure dropped to when the quick acting valve was opened?
_____ psi (_____ kPa)

3.8.3 Criteria

Did the device discharge the hose to 0.0 psi (0.0 kPa)?

Yes No Questionable

If no or questionable, explain _____

Is the device in compliance with this section?

Yes No Questionable

If no or questionable, explain _____

3.9 Backflow Prevention for Type C Devices

3.9.2 Procedure

What was the system pressurized to? _____ psi (_____ kPa)

What was the inlet pressure dropped to when the quick acting valve was opened?
_____ psi (_____ kPa)

After disconnecting the inlet piping, how long was the device held for? _____ hours

3.9.3 Criteria

Was there any leakage through the check valve into the inlet of the device?

Yes No Questionable

If yes or questionable, explain _____

Is the device in compliance with this section?

Yes No Questionable

If no or questionable, explain _____

LISTED LABORATORY: _____

ADDRESS: _____

PHONE: _____ FAX: _____

TEST ENGINEER(S): _____

If applicable:

OUTSOURCED LABORATORY: _____

ADDRESS: _____

PHONE: _____ FAX: _____

TEST ENGINEER(S): _____

Scope of outsourced testing: _____

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 listed laboratory: _____

Signature

Title of the official: _____ Date: _____