



# DELAWARE RURAL WATER ASSOCIATION

210 VICKERS DRIVE, MILFORD, DE. 19963

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| <b>Backflow Test Equipment</b>                             |  |              |             |
|--|--|--------------|-------------|
| <b>Model</b>   | <b>Description</b>   | <b>List</b>  | <b>Qty.</b> |
| Mid-West<br>845-5  | Most Popular – 5 Valve Backflow Prevention Test Kit<br>Includes nine(9) pc quick adapter set | \$952.00     |             |
| Mid-West<br>845-3  | 3 Valve Backflow Prevention Test Kit   | \$895.00     |             |
| 845-5-NP   | 5-Valve Backflow Test Kit <b>NON-POTABLE</b> Water<br>Use                                    | \$925.00     |             |
| 845-5  | Most Popular – 5 Valve Backflow Prevention Test Kit  | \$895.00     |             |
| 835-5  | 5 Valve Backflow Prevention Test Kit Leave in Case   | \$1,095.00   |             |
| 845-3  | 3 Valve Backflow Prevention Test Kit   | \$895.00     |             |
| 845-2  | 2 Valve Backflow Prevention Test Kit   | \$895.00     |             |
| 830  | Industry Standard - 5 Valve Backflow Prevention Kit  | \$1,290.00   |             |
| <b>** Notes Most Popular Models</b>                        |  |              |             |
| <b>Backflow Test Kit Accessories</b>                       |  |              |             |
| <b>Model</b>   | <b>Description</b>   | <b>List</b>  | <b>Qty.</b> |
| 110617   | 9 pc – Quick Connect Adapter Kit   | \$150.00     |             |
| 110694   | Test Cock Cleaning Tool  | \$72.00      |             |
| 98008  | Replacement Filter Element Kit   | \$38.00      |             |
| 830-0001   | Bleed-off Valve Assembly   | \$68.00      |             |
| 830-0003   | Vertical Tube Kit  | \$60.00      |             |
| 110646   | Model 835/845 Five Foot Replacement Hose Set   | \$125.00     |             |
| 110705   | 3 pc - Quick Connect Test Cock Adapter Kit w/<br>90° Swivel Fittings                         | \$75.00      |             |
| 111887   | Quick Connect Test Kit For Male Test Cocks   | \$72.00      |             |
| <b>Shipping &amp; Handling Will Be Added If Applicable</b> |  | <b>\$TBD</b> |             |

Total \$ \_\_\_\_\_

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

### Payment Information:

Check #: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ PO #: \_\_\_\_\_

Credit Card: Visa/Mastercard Name On Card: \_\_\_\_\_

(Circle One)

C/C #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVS #: \_\_\_\_\_