

Information:

Drawer: Accounts Payable - Invoices
Vendor Number: 1087084
Vendor Name: Northern Illinois Backflow
Invoice Number: 21654
Invoice Date: 03/31/20
PO Number: B0368961
Check Number: E0079781
Check Amount: \$ 859.00
Check Date: 04/08/2020
Department ID: 00705
Reviewer Name: Kathy Striplin
Voucher Number: V0615872
Redaction Type: None
Document Type: AP Invoice

Document Below

From: ditchf@cod.edu
Sent: Thu Apr 02 10:18:29 CDT 2020
To: invoicing@cod.edu
CC:
Subject: FW: Invoice/Report



Northern Illinois Backflow

1601 Atlantic Drive Ste. 101
West Chicago, IL 60185

Invoice

Date	Invoice #
3/31/2020	21654

Bill To
College of DuPage Accounts Payable, SRC2049 425 Fawell Blvd Glen Ellyn, IL 60137

Ship To
425 Fawell Blvd Glen Ellyn, IL 60137

APPROVED
04/03/20 - BRUCE SCHMIEDL

Purchase Order	Rep	Tech	Terms	Due Date
	JH	R-KJ	Net 30	4/30/2020
Item	Description	Invoiced	Rate	Amount
Repair - Commercial	4" Febco 860 ser# N0803190805- HSC Room 1322 Northern Illinois Backflow ("NIB") plumber cleaned, flushed and rebuild both the #1 and #2 check as well as the relief valve. Once the device has been rebuilt, plumber tested and certified. Device passed.	1	849.05	849.05
Aqua-Glen Ellyn	Aqua Backflow Filing Fee-Glen Ellyn	1	9.95	9.95
INVOICE REVIEWED OKAY TO PAY KATHY STRIPLIN 04/03/20				
A 3% Administrative Fee Will be Added to All Payments Made by Credit Card				

Total \$859.00

Payments/Credits \$0.00

Balance Due \$859.00

Phone #	Fax #	E-mail	Web Site
630-231-1595	630-231-0550	service@nibackflow.com	www.nibackflow.com



1601 Atlantic Drive

Suite 101

West Chicago, IL 60185

(630) 231-1595

fax: (630) 231 - 0550

www.nibackflow.com

Service Address

Address: 425 FAWELL
Company: College Of DuPage
City: GLEN ELLYN
Hazard: DOM WATER
Location: HSC Room 1322

Serial #: N0803190805
Manufacturer: FEBCO
Model: 860
Type: RP
Size: 4.000
Hazard #: 18 of 161

	Reduced Pressure Principle Assembly			RP <input checked="" type="checkbox"/> DCDA <input type="checkbox"/> DC <input type="checkbox"/> RPDA <input type="checkbox"/> PVB <input type="checkbox"/> Air Gap <input type="checkbox"/> SVB <input type="checkbox"/> AVB <input type="checkbox"/>
	Double Check Valve Assembly			
	Check Valve #1	Check Valve #2	Relief Valve	PVB/SVB
Initial Test	Leaked <input checked="" type="checkbox"/> Closed Tight <input type="checkbox"/> Held at _____ PSID	Leaked <input checked="" type="checkbox"/> Closed Tight <input type="checkbox"/> Held at _____ PSID	Did not Open <input checked="" type="checkbox"/> Opened at _____ PSID	AIR INLET Did not Open <input type="checkbox"/> Opened at _____ PSID
			Buffer _____ PSID	CHECK VALVE Leaked <input type="checkbox"/> Held at _____ PSID
Repairs	Repaired <input checked="" type="checkbox"/>			Repaired <input type="checkbox"/>
Final Test	Closed Tight <input checked="" type="checkbox"/> Held at 7.7 PSID	Closed Tight <input checked="" type="checkbox"/> Held at 7.6 PSID	Opened at 3.2 PSID	AIR INLET Opened at _____ PSID
			Buffer 4.5 PSID	CHECK VALVE Held at _____ PSID

Comments

complete Rebuild - Test Good

The above report is certified to be true.

Line Pressure _____

Held Backpressure ☒

#2 Shutoff ☒

Relief Valve Exercised ☒

	Date/Time	Tester	Signature	Tester #	Test Kit	Passed	Failed
Initial Test	12/27/19	Ken Johnson		XC2884	12110993	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Repairs	03/31/20	Ken Johnson		XC2884			
Final Test	03/31/20	Ken Johnson		XC2884	12110993	<input checked="" type="checkbox"/>	<input type="checkbox"/>