

Online Submittal Instructions for device test data for the City of Wyoming Cross Connection Program

The web submittal of device test data is a simple process. You will enter the data on a web form and be prompted to submit the data once you are confident that the web form is complete. Once the data is submitted you will receive a confirmation email with an attached copy of the completed test form in pdf.

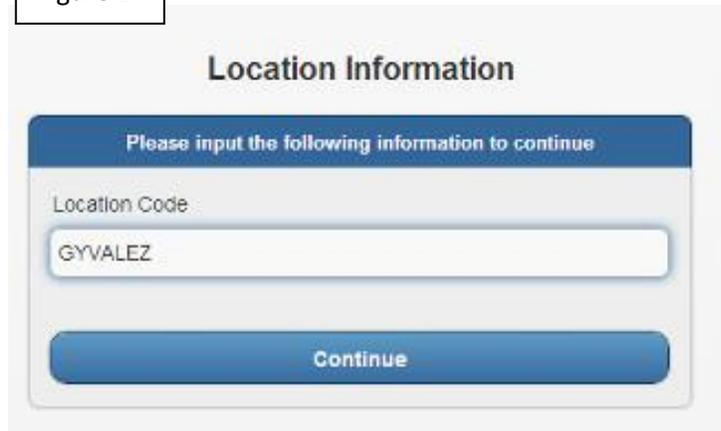
To begin, go to our website www.wyomingmi.gov. Under departments choose utilities, then choose the cross connections page, followed by [Submit Test Results](#) (you can bookmark the site to your Internet favorites). You will then be asked to enter your user name and password (provided by the City of Wyoming) to log into our system (Figure 1). You will then be required to enter the seven digit location code for the facility where the tests were completed (Figure 2). Location codes are entirely alphabetical (no numbers are used). The facility's test notification letter will have the location code and a list of backflow devices installed at the facility. Please contact the facility owner if you are missing this information.

Figure 1



The screenshot shows the FORMLINK SYSTEMS login interface. At the top is the logo with a red 'H' icon. Below it is the text 'Account Information'. There are two input fields: 'Username' with the placeholder 'your userID' and 'Password' with the placeholder 'Password'. A 'Change Password' link is visible below the password field. A blue link says 'Please click here if you have forgotten your password.' At the bottom is a large blue 'Log In' button.

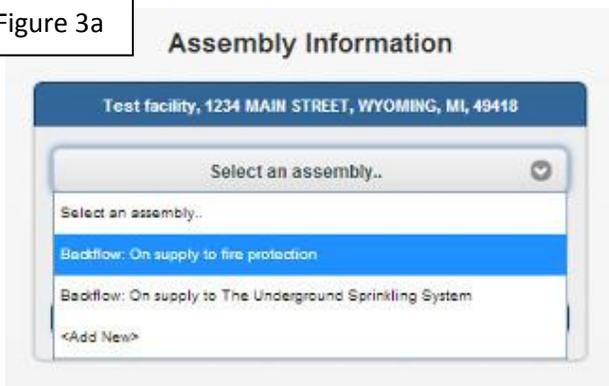
Figure 2



The screenshot shows the 'Location Information' form. The title is 'Location Information'. Below the title is a blue bar with the text 'Please input the following information to continue'. There is a 'Location Code' input field containing the text 'GYVALEZ'. At the bottom is a large blue 'Continue' button.

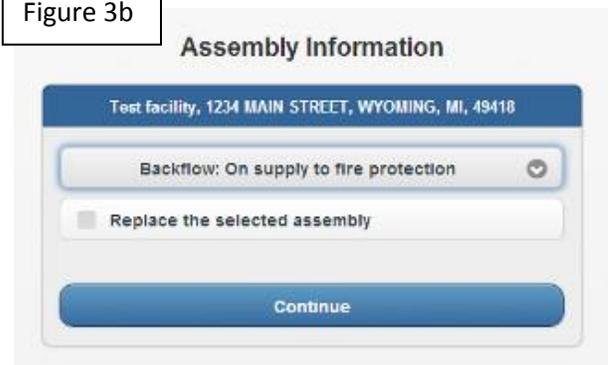
You then will be asked to choose the assembly for which to enter the test results for (Figure 3). If the facility has more than one assembly installed you can choose from a list of assemblies. Be sure to test all assemblies at the facility or the facility will be flagged as non-compliant until we receive the completed test results for all assemblies.

Figure 3a



The screenshot shows the 'Assembly Information' form. At the top is the text 'Test facility, 1234 MAIN STREET, WYOMING, MI, 49418'. Below it is a dropdown menu labeled 'Select an assembly..'. The dropdown is open, showing a list of assemblies: 'Select an assembly..', 'Backflow: On supply to fire protection', 'Backflow: On supply to The Underground Sprinkling System', and '<Add New>'. The 'Backflow: On supply to fire protection' option is highlighted in blue.

Figure 3b



The screenshot shows the 'Assembly Information' form. At the top is the text 'Test facility, 1234 MAIN STREET, WYOMING, MI, 49418'. Below it is a dropdown menu labeled 'Backflow: On supply to fire protection'. Below the dropdown is a checkbox labeled 'Replace the selected assembly'. At the bottom is a large blue 'Continue' button.

When you click continue the test form will open and allow you to enter your test results (Figure 4). Use the fields for each initial test. If the device fails the initial tests be sure to enter the repairs made and complete the final test fields on the form. Make sure to complete all the fields including the pass/fail, closed/open, service restored, and gauge readings. Choose the tester if your company has multiple testers, enter certification number, and sign the form (some notation must be in the signature box). **Be sure to click save.** If any information is missing you will be prompted to finish completing the form before you can save the form. You will be given one more opportunity to review the data before you submit the assembly test results. Submitting the form is final and it cannot be modified once it is submitted.

Figure 4

Initial Test: Held at (PSID): Closed Tight Leaked

Repairs and Materials Used

Final Test CV #1

Final Test: Held at (PSID): Closed Tight Leaked

Check Valve #2

Initial Test: Held at (PSID): Closed Tight Leaked

Repairs and Materials Used

Final Test CV #2

Final Test: Held at (PSID): Closed Tight Leaked

Tester Information

Test Gauge Maker/Model: Serial Number: Cal/Accuracy Date:

Comments:

The above is certified to be true at the time of testing Service Restored:

Company Name: Company Address:

Inspected By: Date of Test: Phone #:

Tester Signature: Certification Number:

Clear

You also have the option to replace the existing assembly if the assembly was changed out. You can also choose add new if a new assembly was installed at the facility. Just fill in a description for the new or replaced assembly and the details can be added when you enter the test results on the web form for the new or replaced assembly. A contractor cannot delete an assembly. If an assembly was removed please email the CC department (crossconnections@wyomingmi.gov) and the assembly will be removed from the system after an onsite visit.

Assembly Information

Test facility, 1234 MAIN STREET, WYOMING, MI, 49418

Backflow: On supply to fire protection

Replace the selected assembly

New Assembly Description

On the supply to fire protection

Continue

Assembly Information

Test facility, 1234 MAIN STREET, WYOMING, MI, 49418

Select an assembly..

Select an assembly..

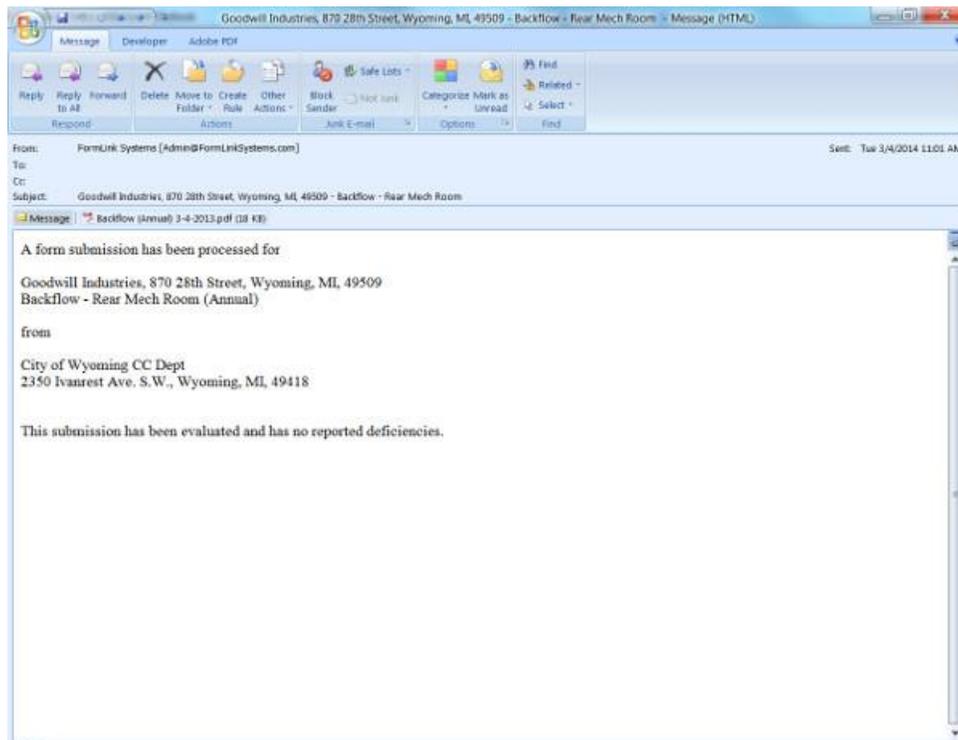
Bedflow: On supply to fire protection

<Add New>

Continue

Just a reminder, be sure to enter all the test results accurately as the CC Department will be reviewing your data. If you have any questions please call the CC Department at 616-261-3568 or email crossconnections@wyomingmi.gov.

Once the completed device test form is saved and the data submitted, you will receive an email confirmation (to the email address you submitted) which will include a copy of the test results for for your records, see below.





City of Wyoming CC Dept
 2350 Ivanrest Ave. S.W.
 Wyoming, MI 49418
 Phone: (616) 261-3568

Account Information			
Facility Name: Test facility	Property Type: Manufacturing	Location Code: EOWKHQG	
Service Address: 1234 MAIN STREET, WYOMING, MI, 49418			
Mailing Name: Joe Blow		Phone: 616-234-4567	
Mailing Address: 1234 MAIN STREET, WYOMING, MI, 49418			
Assembly Information			
Type: DCV	Assembly Description: Backflow (On supply to fire protection)		
Manufacturer: AMES	Model: ss2000	Serial Number: 12548	Size: 4"
Check Valve #1			
Initial Test: <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	Held at (PSID): 10	<input checked="" type="checkbox"/> Closed Tight	<input type="checkbox"/> Leaked
Repairs and Materials Used			
Final Test CV #1			
Final Test: <input type="checkbox"/> Pass <input type="checkbox"/> Fail	Held at (PSID):	<input type="checkbox"/> Closed Tight	<input type="checkbox"/> Leaked
Check Valve #2			
Initial Test: <input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	Held at (PSID): 10	<input checked="" type="checkbox"/> Closed Tight	<input type="checkbox"/> Leaked
Repairs and Materials Used			
Final Test CV #2			
Final Test: <input type="checkbox"/> Pass <input type="checkbox"/> Fail	Held at (PSID):	<input type="checkbox"/> Closed Tight	<input type="checkbox"/> Leaked
Tester Information			
Test Gauge Maker/Model: Watts	Serial Number: 12345	Cal/Accuracy Date: 02/12/14	
Comments:			
The above is certified to be true at the time of testing			Service Restored: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Company Name: City of Wyoming CC Dept	Company Address: 2350 Ivanrest Ave. S.W., Wyoming, MI, 49418		
Inspected By: Tom Engeltuna	Date of Test: 2/10/2014	Phone #: (616) 261-3568	
Tester Signature: 		Certification Number: 01-25	

Return to: the Cross Connection Dept (crossconnections@wyomingmi.gov)