

# TESTER FRAUD – HOW TO FIND AND DEAL WITH BAD TESTERS

PNWS/AWWA CONFERENCE - VANCOUVER  
MAY 2, 2019



# OVERVIEW



**About Tacoma Water**

**Importance of Proper Testing**

**Fraud Versus an Honest Mistake**

**What is the Difference and How Can You Tell**

**Suspected Fraud – Now What**

**Investigate**

**Take Action**

**Actual Events**



# ABOUT TACOMA WATER



**100,000+ Service Connections**

**317,000+ Direct Service Customers**

**150,000+ Additional Indirect Customers**

**12 Different Administrative Authorities**

**3 Health Authorities**

**16,000 Backflow Assemblies Protecting Our System**

**200+ Active Testing Entities**

**300+ Active Backflow Assembly Testers**

**4 Inspectors with Many Other Duties**

# WHAT IS FRAUD?

## FRAUD NOUN

\ 'FRŌD \

### DEFINITION OF *FRAUD*

**1A:** DECEIT, TRICKERY SPECIFICALLY: INTENTIONAL PERVERSION OF TRUTH IN ORDER TO INDUCE ANOTHER TO PART WITH SOMETHING OF VALUE OR TO SURRENDER A LEGAL RIGHT

//WAS ACCUSED OF CREDIT CARD *FRAUD*

**B:** AN ACT OF DECEIVING OR MISREPRESENTING : TRICK

//AUTOMOBILE INSURANCE *FRAUDS*

**2A:** A PERSON WHO IS NOT WHAT HE OR SHE PRETENDS TO BE : IMPOSTOR

//HE CLAIMED TO BE A LICENSED PSYCHOLOGIST, BUT HE TURNED OUT TO BE A *FRAUD*.

//ALSO : ONE WHO DEFRAUDS : CHEAT

**B:** ONE THAT IS NOT WHAT IT SEEMS OR IS REPRESENTED TO BE

//THE UFO PICTURE WAS PROVED TO BE A *FRAUD*.



# WHAT IS FRAUD

# LACK OF



&



# BACKFLOW ASSEMBLIES & TESTING



WHY DO WE REQUIRE BACKFLOW ASSEMBLIES???

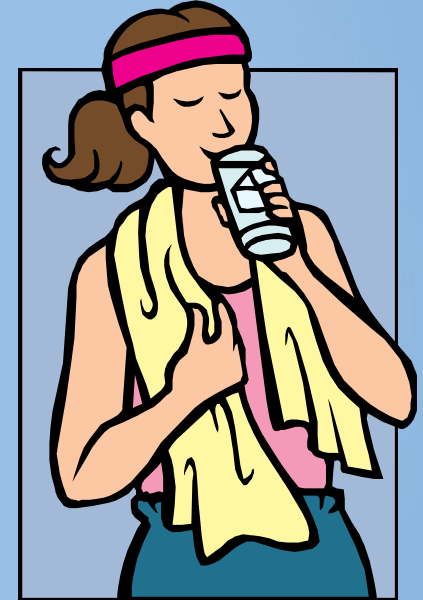
WHY DO WE REQUIRE TESTING???

Protect the distribution system?

Protect the customers?

Meet a State requirement?

Make money?



# PUBLIC HEALTH



# WHAT DOES A BAT DO?



A BAT SHALL **INSPECT**, **FIELD TEST**, MAINTAIN, AND REPAIR BACKFLOW PREVENTION ASSEMBLIES, BACKFLOW PREVENTION DEVICES, AND AIR GAPS THAT PROTECT THE PUBLIC WATER SYSTEM AND **REPORT** THE RESULTS AS REQUIRED



# WHAT DOES A BAT DO?

**ACCURATELY** PERFORM INSPECTIONS AND FIELD TESTS

**RECORD** INSPECTION AND FIELD TEST RESULTS  
**COMPLETELY, ACCURATELY, AND LEGIBLY** ON A  
BACKFLOW PREVENTER INSPECTION AND FIELD TEST  
REPORT THAT MEETS THE PURVEYOR REQUIREMENTS

**ACCURATELY INTERPRET INSPECTION RESULTS** AND  
DETERMINE WHETHER OR NOT THE BACKFLOW  
PREVENTION ASSEMBLY IS PROPERLY INSTALLED

**ACCURATELY INTERPRET THE FIELD TEST RESULTS** AND  
DETERMINE IF A BACKFLOW PREVENTION ASSEMBLY  
PASSED OR FAILED THE FIELD TEST

**ACCURATELY INTERPRET AIR GAP INSPECTION RESULTS**  
AND DETERMINE IF THE AIR GAP IS AN APPROVED AIR GAP  
AT THE TIME OF INSPECTION

**WHY IS THIS IMPORTANT?**





# PURPOSE OF RULES AND CODES?



**ESTABLISHES STANDARDS AND EXPECTATIONS**

**COMMUNICATE YOUR STANDARDS AND EXPECTATIONS**

**CAN HOLD OTHERS TO THESE STANDARDS AND EXPECTATIONS**

**BASIS FOR ENFORCEMENT OR CORRECTIVE ACTION**



# IS IT FRAUD?

## Honest Mistake

Typo

DCVA/RPBA

Mixed up Reports/Addresses

Bad Gage

## Fraud

Non-Existent Assemblies

Water Service Locked Out

Never Tested

Copied From Previous Years

Not Certified to Test

How Do You Tell The Difference?



# HONEST MISTAKE

## Typos

Wrong date

Misplaced values

Misread make, model, size or serial number

Test DC & RP and record values on wrong test report

Test at wrong location – neighbors house

Bad gage gives erroneous readings – Not consistent





### BACKFLOW PREVENTION ASSEMBLY TEST REPORT

Return To:  
Water Division  
Water Quality Section  
PO BOX 11007  
Tacoma, WA 98411-0007  
FAX: 252-502-8729

RECEIVED

File # 2005 Schedule Code 08-AUG Authorized Tester: JUL 27 2005  
 Facility Name 0000000000 City: TACOMA Zip: 98402  
 Service Address 0000000000 City: TACOMA Zip: 98402  
 Contact Name \_\_\_\_\_ Phone: 55000 FAX: 55000  
 Ass Location WEST WALL OF BASEMENT  
 Hazard Type FIRE SERVICES-LOW HAZ DCVA  RPBA  PVEA  AG  Other \_\_\_\_\_  
 New Install  Existing  Replacement  Old SN# \_\_\_\_\_ Proper Installation?  Yes  No  
 Make of Assembly WATTS Model: 709 Serial Number 0000 Size: 6"

Initial Test Passed <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	<u>DCVA/RPBA</u> CHECK VALVE #1 Leaked <input type="checkbox"/> <u>2.5</u> PSID	<u>DCVA/RPBA</u> CHECK VALVE #2 Leaked <input type="checkbox"/> <u>2.0</u> PSID	<u>RPBA</u> Opened at <u>2.5</u> PSID #1 Check <u>7.0</u> PSID Air Gap OK <input checked="" type="checkbox"/>	<u>PVEA/SVEA</u> Air Inlet Opened at _____ PSID Did not Open <input type="checkbox"/>
New Parts and Repairs	Clean Replace Part <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	Clean Replace Part <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	Clean Replace Part <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	Check Valve Held at _____ PSID Leaked <input type="checkbox"/> Cleaned <input type="checkbox"/> Repaired <input type="checkbox"/>
Test After Repairs Passed <input type="checkbox"/> Failed <input type="checkbox"/>	Leaked _____ _____ PSID	Leaked <input type="checkbox"/> _____ PSID	Opened at _____ PSID #1 Check _____ PSID	Air Inlet _____ PSID Check Valve _____ PSID

Air Gap Inspection: Supply Pipe Diameter: \_\_\_\_\_" Separation: \_\_\_\_\_" Pass  Fail   
 Remarks: \_\_\_\_\_ Line Pressure 20 PSI  
 Confined Space

Tester Signature: \_\_\_\_\_ Cert. No.: 0000 Date: 0000  
 Tester Name Printed: \_\_\_\_\_ Testers Phone #: 0000000000  
 Required By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Final Test By: \_\_\_\_\_ Cert. No.: \_\_\_\_\_ Date: \_\_\_\_\_  
 Calibration Date: 1-18-05 Make/Model Fisher RPT-1 Gauge # 000000

I certify that this report is accurate, and I have used WAC 746-290-490 approved test methods and test equipment.  
 TEST REPORTS MUST BE SUBMITTED IN ACCORDANCE WITH TACOMA WATER GUIDELINES  
 AVAILABLE AT WWW.TACOMAWATER.COM ON THE WATER QUALITY PAGE



### BACKFLOW PREVENTION ASSEMBLY TEST REPORT

Return To:  
Water Division  
Water Quality Section  
PO BOX 11007  
Tacoma, WA 98411-0007  
FAX: 252-502-8721

File # 00000 Schedule Code 05-MAY Authorized Tester: \_\_\_\_\_  
 Facility Name 0000000000000000000000 Commercial:  Residential:   
 Service Address 0000000000 City: TACOMA Zip: 98402  
 Contact Name \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
 Ass Location BOILER ROOM ABOVE PUMPS  
 Hazard Type HOSE BIB - HIGH HAZARD DCVA  RPBA  PVEA  AG  Other \_\_\_\_\_  
 New Install  Existing  Replacement  Old SN# \_\_\_\_\_ Proper Installation?  Yes  No  
 Make of Assembly: FEBCO Model: 825V Serial Number 0000 Size: 3/4"

Initial Test Passed <input checked="" type="checkbox"/> Failed <input type="checkbox"/>	<u>DCVA/RPBA</u> CHECK VALVE #1 Leaked <input type="checkbox"/> <u>7.6</u> PSID	<u>DCVA/RPBA</u> CHECK VALVE #2 Leaked <input type="checkbox"/> <u>1.6</u> PSID	<u>RPBA</u> Opened at _____ PSID #1 Check _____ PSID Air Gap OK _____	<u>PVEA/SVEA</u> Air Inlet Opened at _____ PSID Did not Open <input type="checkbox"/>
New Parts and Repairs	Clean Replace Part <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	Clean Replace Part <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	Clean Replace Part <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	Check Valve Held at _____ PSID Leaked <input type="checkbox"/> Cleaned <input type="checkbox"/> Repaired <input type="checkbox"/>
Test After Repairs Passed <input type="checkbox"/> Failed <input type="checkbox"/>	Leaked _____ _____ PSID	Leaked <input type="checkbox"/> _____ PSID	Opened at _____ PSID #1 Check _____ PSID	Air Inlet _____ PSID Check Valve _____ PSID

Air Gap Inspection: Supply Pipe Diameter: \_\_\_\_\_" Separation: \_\_\_\_\_" Pass  Fail   
 Remarks: \_\_\_\_\_ Line Pressure 25 PSI  
 Confined Space

Tester Signature: \_\_\_\_\_ Cert. No.: 0000 Date: 5-20-06  
 Tester Name Printed: \_\_\_\_\_ Testers Phone #: 0000000000  
 Required By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Final Test By: \_\_\_\_\_ Cert. No.: \_\_\_\_\_ Date: \_\_\_\_\_  
 Calibration Date: 1-16-06 Make/Model Fisher RPT-1 Gauge # 000000

I certify that this report is accurate, and I have used WAC 746-290-490 approved test methods and test equipment.  
 TEST REPORTS MUST BE SUBMITTED IN ACCORDANCE WITH TACOMA WATER GUIDELINES.  
 AVAILABLE AT WWW.TACOMAWATER.COM ON THE WATER QUALITY PAGE

# FRAUD

**Non existent assemblies**

**No water to assembly – Water off**

**Not tested – field verified**

**Data copied from previous years**

**Tester not certified**



# MISSING ASSEMBLY





# BACKFLOW PREVENTION ASSEMBLY TEST REPORT

Return To:  
Water Division  
Water Quality Section  
PO BOX 11807  
Tacoma, WA 98411-0007  
FAX: 253-512-8721

File # **143414444** Authorized Tester: \_\_\_\_\_  
Facility Name: **143414444** Commercial:  Residential:   
Service Address: **143414444** City: Tacoma Zip: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
Assy Location: Hydco section  
Hazard Type: DOMESTIC USE DCVA  RPBA  PVBA  AG  Other \_\_\_\_\_  
New Install  Existing  Replacement  Old SNE Proper Installation?  Yes  No  
Make of Assembly: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_ Size: \_\_\_\_\_

Initial Test	DCVA/RPBA CHECK VALVE #1	DCVA/RPBA CHECK VALVE #2	RPBA	PVBA/SVBA Air Inlet
Passed <input type="checkbox"/> Failed <input type="checkbox"/>	Leaked <input type="checkbox"/> PSID	Leaked <input type="checkbox"/> PSID	Opened at _____ PSID #1 Check _____ PSID Air Gap OK _____	Opened at _____ PSID Did not Operate <input type="checkbox"/>
New Parts and Repairs	Clean Replace Part <input type="checkbox"/> <input type="checkbox"/>	Clean Replace Part <input type="checkbox"/> <input type="checkbox"/>	Clean Replace Part <input type="checkbox"/> <input type="checkbox"/>	Check Valve Held at _____ PSID Leaked <input type="checkbox"/> Cleaned <input type="checkbox"/> Repaired <input type="checkbox"/>
Test After Repairs Passed <input type="checkbox"/> Failed <input type="checkbox"/>	Leaked <input type="checkbox"/> PSID	Leaked <input type="checkbox"/> PSID	Opened at _____ PSID #1 Check _____ PSID	Air Inlet _____ PSID Check Valve _____ PSID

Air Gap Inspection: Supply Pipe Diameter: 2.0 Separation: 3.0 Pass  Fail   
Remarks: **143414444** Line Pressure: \_\_\_\_\_ PSI  
Tester Signature: **143414444** Cert. No.: B2246 Date: 4/27/15  
Tester Name Printed: **143414444** Testers Phone #: **143414444**  
Repaired By: \_\_\_\_\_ Date: \_\_\_\_\_  
Final Test By: \_\_\_\_\_ Cert. No.: \_\_\_\_\_ Date: \_\_\_\_\_  
Calibration Date: 1/5/15 Make/Model: \_\_\_\_\_ Midwest/830 Gauge #: **143414444**

I certify that this report is accurate, and I have used WAC 246-200-290 approved test methods and test equipment.  
TEST REPORTS MUST BE SUBMITTED IN ACCORDANCE WITH TACOMA WATER GUIDELINES.  
AVAILABLE AT WWW.TACOMAWATER.COM ON THE WATER QUALITY PAGE



# BACKFLOW PREVENTION ASSEMBLY TEST REPORT

Return To:  
Water Division  
Water Quality Section  
PO BOX 11807  
Tacoma, WA 98411-0007  
FAX: 253-512-8721

File # **143414444** Authorized Tester: \_\_\_\_\_  
Facility Name: **143414444** Commercial:  Residential:   
Service Address: **143414444** City: Tacoma Zip: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_  
Assy Location: Hydco section  
Hazard Type: DOMESTIC USE DCVA  RPBA  PVBA  AG  Other \_\_\_\_\_  
New Install  Existing  Replacement  Old SNE Proper Installation?  Yes  No  
Make of Assembly: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_ Size: \_\_\_\_\_

Initial Test	DCVA/RPBA CHECK VALVE #1	DCVA/RPBA CHECK VALVE #2	RPBA	PVBA/SVBA Air Inlet
Passed <input type="checkbox"/> Failed <input type="checkbox"/>	Leaked <input type="checkbox"/> PSID	Leaked <input type="checkbox"/> PSID	Opened at _____ PSID #1 Check _____ PSID Air Gap OK _____	Opened at _____ PSID Did not Operate <input type="checkbox"/>
New Parts and Repairs	Clean Replace Part <input type="checkbox"/> <input type="checkbox"/>	Clean Replace Part <input type="checkbox"/> <input type="checkbox"/>	Clean Replace Part <input type="checkbox"/> <input type="checkbox"/>	Check Valve Held at _____ PSID Leaked <input type="checkbox"/> Cleaned <input type="checkbox"/> Repaired <input type="checkbox"/>
Test After Repairs Passed <input type="checkbox"/> Failed <input type="checkbox"/>	Leaked <input type="checkbox"/> PSID	Leaked <input type="checkbox"/> PSID	Opened at _____ PSID #1 Check _____ PSID	Air Inlet _____ PSID Check Valve _____ PSID

Air Gap Inspection: Supply Pipe Diameter: 2.0 Separation: 3.0 Pass  Fail   
Remarks: **143414444** Line Pressure: \_\_\_\_\_ PSI  
Tester Signature: **143414444** Cert. No.: 1434 Date: 4/27/15  
Tester Name Printed: **143414444** Testers Phone #: **143414444**  
Repaired By: \_\_\_\_\_ Date: \_\_\_\_\_  
Final Test By: \_\_\_\_\_ Cert. No.: \_\_\_\_\_ Date: \_\_\_\_\_  
Calibration Date: 1/5/15 Make/Model: \_\_\_\_\_ Midwest/830 Gauge #: **143414444**

I certify that this report is accurate, and I have used WAC 246-200-290 approved test methods and test equipment.  
TEST REPORTS MUST BE SUBMITTED IN ACCORDANCE WITH TACOMA WATER GUIDELINES.  
AVAILABLE AT WWW.TACOMAWATER.COM ON THE WATER QUALITY PAGE

# IS IT FRAUD?

## Honest Mistake versus Fraud



**Important to NOT Jump to Conclusions**





# IS IT FRAUD?

**You suspect fraud – Now what?**

**Investigate**

**Document**

**Take Action**



# IS IT FRAUD?

## Investigate

**Are there historical issues with the tester?**

**Reputation with other utilities**

**Past suspicious activity**

**Review paperwork**

**Completed properly**

**Too many tests in a single day**

**Duplicate submittals on different days**

**Site visit**

**Obviously not tested**

**Doesn't exist**



# IS IT FRAUD

## Investigation Tools

**Safety equipment**

**Maps/drawings**

**Consumption records**

**Permit records**

**Camera**

**Tablet**

**Pen/paper**

**Flashlight**

**Informational material for customer**

**2<sup>nd</sup> inspector**

**Past inspections/backflow records**



# IS IT FRAUD

## Getting Started

Review drawings, existing records

Gather tools and equipment

Check –

**ID**



**Camera, flashlight with good batteries**

**Memory cards**

**Ink in pen**

**Correct paperwork**

**Contact name and number**

**Business cards**

**Security requirements – TWIC, ....**



# IS IT FRAUD

## Take notes

Locations

Backflow prevention present/missing

## Take pictures

Hazards

Labels

Backflow Installations

## Draw sketches

Tablet with a pen

# Do not rely on memory alone



# IS IT FRAUD?

## Document

Cannot prove without evidence – suspicion isn't enough

## Pictures – Pictures – Pictures

Communication/interactions with tester/employer

Take meticulous notes – Stick to the facts



# IS IT FRAUD?

## Take Action

**Contact Tester**

**When?**

**Contact Enforcement Authority (DOH)**

**When?**

**Contact Customer**

**When?**

**What if you suspect but don't have enough proof?**



# IS IT FRAUD?

## Take Action

**Schedule a meeting with the tester and their boss**

**Suspend testing in your service area**

**Pursue suspension or revocation of certification**

**Do you ever let them test in your area again?**

**No**

**Yes**

**Yes with conditions – probation?**





# REAL SCENARIOS

## A Family Affair

- Grandmother owns assembly
- Grandson testing for several years
- New database for tracking
- Tester worked for a local utility
- Grandson was paid for services



# REAL SCENARIOS

## New Condo Construction

- **Performing final inspection for building occupancy**
- **Tester appeared to be completing test as I walked in**
- **Tester did not know who I was**
- **Tester handed me reports he “just completed”**
- **Tester fought in court – Hearing Examiner**



Fraudulent Backflow Assembly Test:

Tester Name - [REDACTED]  
Tester Cert # [REDACTED]  
Listed as an employee of - [REDACTED]  
[REDACTED] 6

Home Address - [REDACTED]  
Phone Number - [REDACTED] (work) [REDACTED]

On October 17, 2002 at approximately 3:36 PM a Water Quality inspection was performed at [REDACTED] Tacoma WA [REDACTED]. The purpose of the inspection was to ensure that all required backflow assemblies were properly installed and tested prior to building occupancy. When I arrived it appeared, (water on the floor), that the tester had just completed testing the double check valve assemblies (DCVA) installed on the main water service line and the fire service line. While I waited for the tester to complete the paperwork I had the opportunity to closely inspect the backflow assemblies. During the inspection it was noted that the #1 and #4 test cocks on the 6" fire assembly had not been cycled as required by testing procedures. Both the #1 & #4 test cocks were dry; in addition the #4 test cock had construction debris and drywall dust in it. The test report the tester provided to me clearly listed differential pressure values for both check valves. I questioned the tester as to how he was able to obtain the differential pressure across #2 check valve without utilizing #4 test cock, he stated that he obtained the value by using #2 & #3 test cocks. I left the work area and went out to my truck to review the "Backflow Prevention assembly Field Test Procedures Approved for Use in Washington State". The procedures clearly state that not only must all four test cocks be flushed but that the differential pressure value across #2 check valve must be obtained by using #3 & #4 test cocks. When I returned to the work area I found that 'someone' had flushed water out of #4 test cock while I was gone. I informed the tester that I was rejecting the test reports and Tacoma Water will not be accepting my test reports from him until further notice. I also informed the project Superintendent that I would not accept the test reports and why I was rejecting them. The tester stated that this is how he has always tested the assemblies, including during refresher training, and offered to show me what he did. I did not allow him to perform another test. I retained the fraudulent test reports and informed you of my findings.



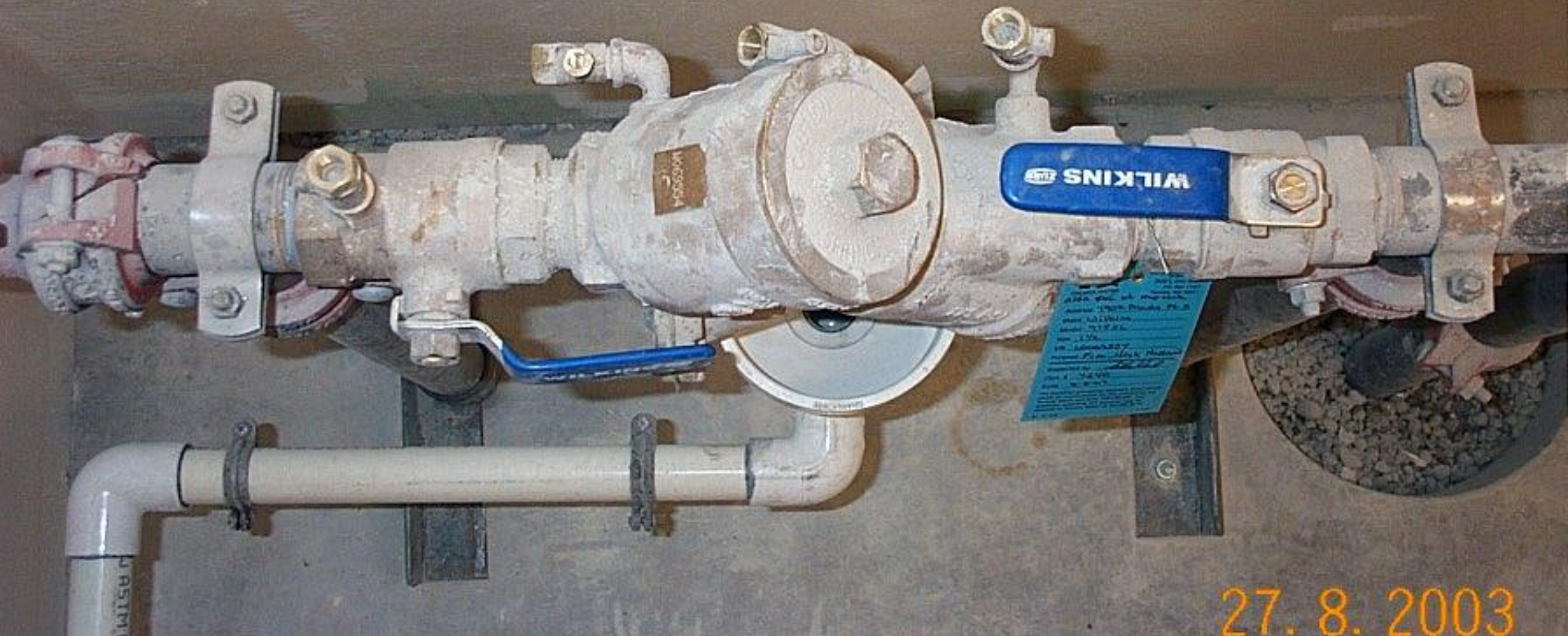
# REAL SCENARIOS

## New School Construction

- Performed final inspection for building occupancy
- Provided test reports by project Superintendent
- Conducted inspection of all assemblies
- RPBA installed on fire branch line had drywall dust in test ports
- Superintendent confirmed tests were “completed” earlier in the day and no work had occurred in the room.







27. 8. 2003

# REAL SCENARIOS

## Regional Park Agency

- **Contract testing out to private company**
- **Received test reports for assemblies no longer installed**
- **Site investigation showed many irregularities**
- **Lack of concrete evidence beyond a reasonable doubt**
- **Called meeting with tester, his boss and Parks Department Supervisor**
- **Required re-test under observation**



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

RE: BACKFLOW ASSEMBLY TESTING

Dear Mr. [REDACTED]

This letter is written to provide you with formal written notice that Tacoma Water will not accept any backflow assembly test reports from you or [REDACTED] until further notice and for the reason outlined below.

On June 10, 2014 I was presented with five (5) backflow assembly test reports submitted by you for testing completed on June 7, 2014 at the [REDACTED] address in Tacoma, Washington. The test reports clearly indicated that the assemblies to be tested were double check valve assemblies (DCVA) but the test reports submitted by you indicated that reduced pressure backflow assemblies (RPBA) were tested. I conducted a site inspection of the property on June 12, 2014 and confirmed that DCVA's, not RPBA's, are installed. During my visual inspection of the assemblies it also appeared that the assemblies had not been recently tested.

This issue has been forwarded to the State of Washington Department of Health - Certification Offices for review and possible further action.

I encourage you to contact me as soon as possible to discuss this matter. I can be reached by email at [stulencic@cityoftacoma.org](mailto:stulencic@cityoftacoma.org) or by telephone at 253-562-8213 during normal business hours.

Sincerely,

Scott D. Hallenberg  
Water Quality  
Operations Manager

CC: Deri Gray, State of Washington, Department of Health - Certification Offices  
Terri Nonesrino, State of Washington, Department of Health - CCO Program Manager





# REAL SCENARIOS

## Large Apartment Complex

- Received 5 test reports for irrigation system DCVA's
- System has DCVA's installed
- New tester
- Made immediate site visit
- Obvious none of them were actually tested

**Much BIGGER problems uncovered**





# Certified Waterworks Operator Complaint Form

Assigned Complaint Number:  
January 2-2014



Please fill out as completely as possible, attach any additional information when you have it, on this complaint. Instructions are on the back.

1. Complainant Name Scott Hallenberg, City of Tacoma Water Division PWS ID#56800N		3. Description ( )
2. Mailing Address PO Box 11007 Tacoma WA 98411		4. Work phone (360) 502-8215
		5. Home phone ( )

5. Respondent's Name [Redacted]		6. Home phone [Redacted]
7. Business Name [Redacted]		8. Work phone ( )
9. Mailing Address (if known) [Redacted]		9. Fax number [Redacted]
City [Redacted]	State WA	7. Title [Redacted]

Is Respondent an owner/operator of a public water system? If so please complete.

10. Water System Name	11. ID Number	12. County
13. Owner Name	14. Contact Person (Not Water System Owner)	

If you answer "Yes" to any of the following questions, please provide details in your complaint.

Have you tried to resolve your complaint with the other party?  Yes  No

Did you advise the other party that you were considering filing a complaint with us?  Yes  No

**Complaint Description**

Attach a statement describing your complaint, if as applicable as possible. Describe what work the party was hired to perform if applicable. Describe what actions led you to file this complaint. Provide documentation to support your allegation and include dates of alleged wrongdoing.

**NOTE:** Based on the seriousness of your complaint and the possible consequences of an action or re-occurrence of someone's conduct, it is likely that your notice would have to be received by the respondent at some point during the investigation of the complaint. An exception to this would be if your complaint was covered under the "Whistleblower" protections found in chapter 42-40 or 42-41 RCW.

Signature: [Signature] Date: 1-16-14

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing and any attachments hereto, which are incorporated herein by reference, are true and correct.

Completed by: Jackie Walker Complaint Type: \_\_\_\_\_ Date: \_\_\_\_\_

Complaint referred to: \_\_\_\_\_

For people with disabilities this document is available on request in other formats. To submit a request, please call: 1-800-526-0127 (TDD/TTY call: 7-11).



## Tester Communication – Other Utility

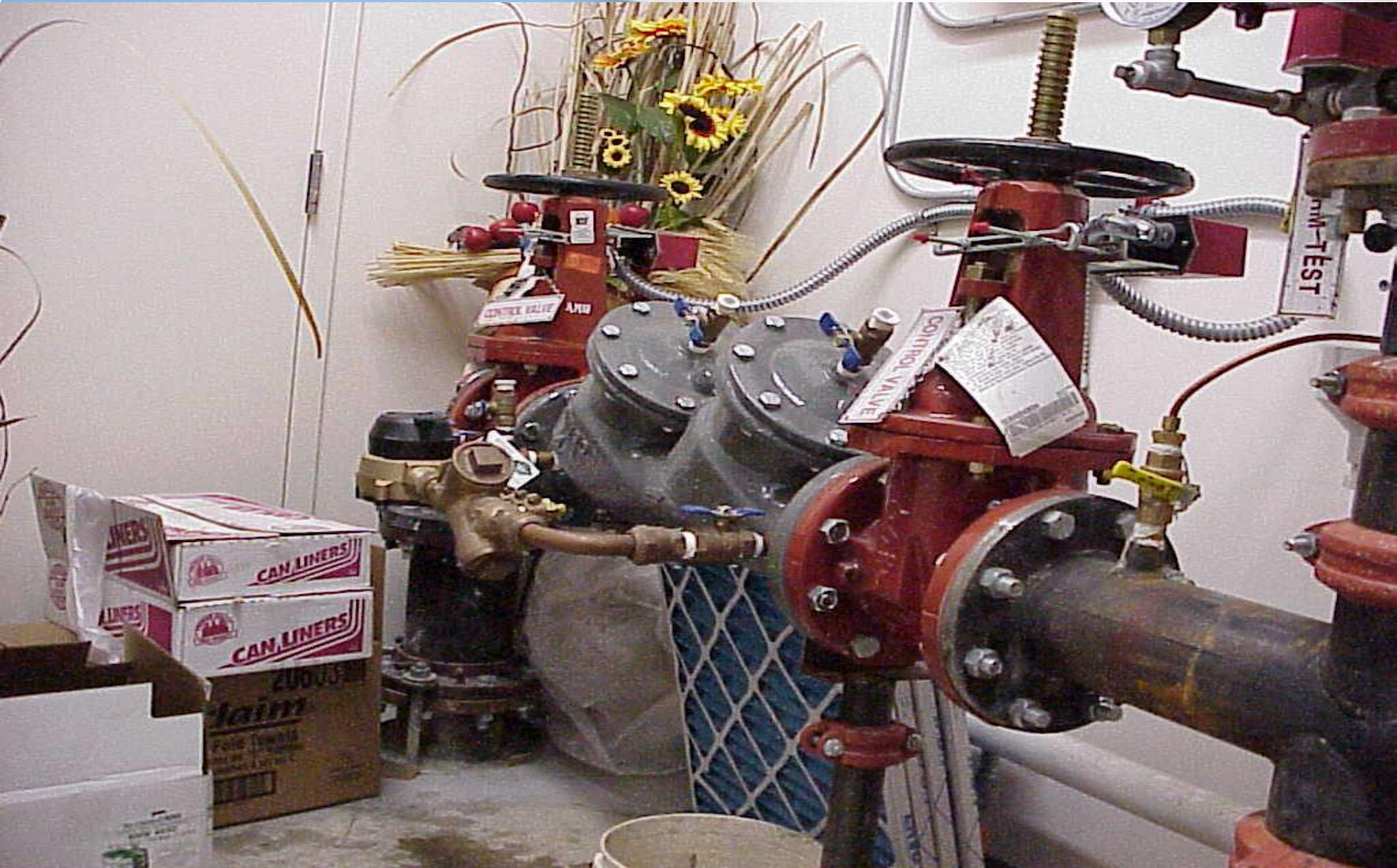
- Tested commercial fire system
- Number 2 check failed – broken
- Removed check assembly and showed/informed owner of need to replace
- Customer called later to tell him he had another tester test and it passed.
- Informed Utility of false test by other tester
- Utility had no interest in pursuing
  - Why?



# HONEST MISTAKE IN THE MAKING?



# WILL THIS BE TESTED?



# WAS THIS TESTED?



# WILL THIS BE TESTED?



Limpiar el Disp

- To disconnect the **empty box**:
1. Press both white buttons on Quick Disconnect.
  2. Pull Blue Ring back.
  3. Position box on shelf with perforation for spout.
  4. Press in on the thumb.

# SUMMARY

- Most testers are doing the right thing
- How we address those that are not is important
- Don't jump to conclusions or make assumptions
- Deal in facts and document everything
- Be prepared to be challenged – Have the documentation to back up your claims

Remember

**PUBLIC HEALTH**





# QUESTIONS?



# CONTACT INFORMATION:



**SCOTT HALLENBERG  
OPERATIONS MANAGER  
TACOMA WATER – WATER QUALITY  
PO BOX 11007  
TACOMA, WA 98411-0007**

**DESK – 253-502-8215  
CELL – 253-208-5345  
FAX – 253-502-8721**

**[SHALLENB@CITYOFTACOMA.ORG](mailto:SHALLENB@CITYOFTACOMA.ORG)  
[BACKFLOW@CITYOFTACOMA.ORG](mailto:BACKFLOW@CITYOFTACOMA.ORG)**

