

12726 Roswell Ave Chino, CA 91710 909 627-2697 Fax: 909 591-1243

June 9, 2024

Hello Cibola!

I will be in town to do the annual backflow testing July 1st to Aug 31st. Please take advantage of this time frame as cost to test may be more if a special trip is required. Cost to test (pass or fail) will be \$55.00 COD, or prepaid in advance. This includes filing paperwork with the water company and any follow up needed.

Please return or submit the online form with your payment & I'll do the rest. To schedule your test with COD payment, contact 909 627-2697, email me at mike@d-r-plumbing.com or mail to D &R Plumbing 12726 Roswell Ave Chino, CA 91710. Be sure to provide the information below as it appears on your water bill and payment.

The backflow preventers in Cibola are starting to need work. In an effort to keep costs down, expedite repairs and save you money, I have attached a price list on page 2 for repairs if needed at the time of testing. These prices are only valid at time of testing. If you choose not to pre- approve repairs, cost to repair will be higher. If the device is not serviceable, I will contact you for approval prior to replacement.

Try our online form at: https://d-r-plumbing.com/cibola/

water account # REQUIRED BY THE WATER COMPANY		
Name:		Ph#:
Mailing Address:		
City:	State	Zip Code:
Service Address (back	rflow location)	
Email address:		
Please Provide applica	able payment info:	
Payment methods:	CashCheck	Venmo (@drplbg)
	Zelle (909 9171464)	Credit card (\$3.00 fee applies)

See back of page to pre approve repairs if needed



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Common Repair Costs

Clean & retest	\$90.00
Clean, rebuild, & retest 975XL 1" or 3/4 device	
If seats are needed add	
Brass Test cock replacement	\$28.00 ea
If 3/4 or 1" device is not serviceable and needs re I Will contact you prior to replacement, to get form	•
Pre- Approval: (only if repairs are needed)	
I hereby approve the above repairs if deemed as needed test. Repair costs will be billed and due upon completion of for approval prior to commencement of work if device nee provide payment info.	of repairs. I will be contact you
Print Clearly	
Approved By:	
Print Name:	
Ph:	