



## §6-4-10 Annual Vehicle Wash Equipment Evaluation Form

**\*\*Inspection must be performed by a plumber licensed by the State of Texas\*\***

Name of Facility: \_\_\_\_\_ Water Meter #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Name of Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### Rule #: R161-13.16

- |                          |                          |                          |   |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> |                          | (a) No leaks are present in wash equipment.   |
| Pass                     | Fail                     |                          |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (b) In-bay, hand-held spray equipment, including a spray wand or foaming brush, does not use more than 3.5 gallons of water per minute and has a trigger shutoff and protective weep.   |
| Pass                     | Fail                     | N/A                      |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (c) Portable pressure wash equipment must have a spray nozzle with a positive shut off and protective weep mechanism and shall not use more than the following:   |
| Pass                     | Fail                     | N/A                      | <ul style="list-style-type: none"> <li>• 3.5 gallons of water per minute for passenger vehicles including automobiles, delivery vans, and buses; or</li> <li>• 10.0 gallons of water per minute for commercial equipment vehicles such as front-end loaders, dump trucks, earth movers or other similar equipment.</li> </ul> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (d) A conveyor or drive-through friction system does not use more than 35 gallons for each vehicle.   |
| Pass                     | Fail                     | N/A                      |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (e) A conveyor or drive-through touchless system does not use more than 35 gallons for each vehicle.  |
| Pass                     | Fail                     | N/A                      |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (f) An in-bay rollover automatic system does not use more than 75 gallons per vehicle for buses and other similar large vehicles.   |
| Pass                     | Fail                     | N/A                      |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (g) An in-bay rollover automatic system does not use more than 45 gallons per vehicle.  |
| Pass                     | Fail                     | N/A                      |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (h) Each chamois wringer has a positive shutoff valve.  |
| Pass                     | Fail                     | N/A                      |   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | (i) A system using reverse osmosis rinse water must reclaim, and reuse, reject water.   |
| Pass                     | Fail                     | N/A                      |   |

**Please fill out the worksheet on the back of this page with the results of the testing performed. The audit form will not be accepted without a completed worksheet.**

**(b) Spray Wand**

	GPM	Trigger shutoff
Bay 1		
Bay 2		
Bay 3		
Bay 4		
Bay 5		
Bay 6		
Bay 7		
Bay 8		
Bay 9		
Bay 10		
Bay 11		
Bay 12		
Bay 13		
Bay 14		
Bay 15		

**(b) Foaming Brush**

	GPM	Trigger shutoff
Bay 1		
Bay 2		
Bay 3		
Bay 4		
Bay 5		
Bay 6		
Bay 7		
Bay 8		
Bay 9		
Bay 10		
Bay 11		
Bay 12		
Bay 13		
Bay 14		
Bay 15		

**(c) Portable Pressure Wash Equipment**

	GPM	Trigger shutoff
Unit 1		
Unit 2		
Unit 3		
Unit 4		
Unit 5		
Unit 6		
Unit 7		
Unit 8		
Unit 9		
Unit 10		
Unit 11		
Unit 12		
Unit 13		
Unit 14		
Unit 15		

**(d) Conveyor Friction System**

	GPV
System 1	
System 2	
System 3	
System 4	
System 5	
System 6	
System 7	
System 8	
System 9	
System 10	

**(e) Conveyor Touchless System**

	GPV
System 1	
System 2	
System 3	
System 4	
System 5	
System 6	
System 7	
System 8	
System 9	
System 10	

**(f) / (g) Rollover Automatic System**

	GPV
System 1	
System 2	
System 3	
System 4	
System 5	
System 6	
System 7	
System 8	
System 9	
System 10	

***This section signed by inspecting plumber***

***I hereby certify the inspection results provided on this form are true and accurately reflect my findings:***

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

Title: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Printed Name: \_\_\_\_\_

License No.: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Return completed forms to:**

City of Austin, Water Conservation Office  
P.O. Box 1088  
Austin, TX 78767

Email: [FacEvalSubmit@austintexas.gov](mailto:FacEvalSubmit@austintexas.gov)  
Fax: 512-974-3504