Backflow Prevention Recertification Application

An Application must be filled out for each individual.

There is a non-refundable \$50.00 application fee.

Applicants Information	Business Information
Name:	Name:
Mailing Address:	Federal Tax Id:
City, State & Zip:	Mailing Address:
Phone Number:	City, State & Zip:
Old Certification Number:	Phone Number:
Email Address:	Email Address:
Please mark the appropriate type of tester:	Recertification Request Date
General General	Receitification Request Date
Limited	
Inspector	
Inispector	
Method of Payment:	
Checks <u>payable to GSWSA</u> and Credit Cards (Visa, Master	Card & Discover) can be mailed to PO Box 2368. Conway
SC 29528 or e-mail information written below that would	
<u> </u>	
Checks	
Bank Name:	
Routing Number:	
Checking Account Number:	
Check Number:	
Credit Card	
Credit Card Type:	

Date:
Signature:

If you have any questions please call or email:
Nick Mincey (843) 443-8214 or <u>nickmincey@gswsa.com</u>
Lindsey Gilbert (843) 443-8290 or lindsey@gswsa.com

Credit Card Number:

CCV (security code on back):

Exp. Date: