

Campbell County Utilities & Service Authority

20644 Timberlake Road, Lynchburg, Virginia 24502 Phone: (434) 239-8654 – Fax: (434)237-5820 – Internet: ccusa-water.com

Application

Backflow Prevention Assembly Tester

Name :					
[Print] Last		First		Middle	{Sr.Jr.III}
Address:					
Street		City		State	Zip
Contact Information:	Phone#		Cell#		
	Email :				_
Employer :					
Address :		City			
		•		State	Zip
Contact Information:	Phone#		Cell#		
	Email :				_
Insurance : Company { If Self Employed }			Phone		
	Agent -		Policy # -		
	<i>G</i> * * <u></u>		•		
Licensing Agency:					
	State			County/City	
Certification #:					
	State	Expiration Date		County/City Expir	ation Date
Certified for:	Installations	☐ Tests ☐ Repair	rs Surveys		
Other Licenses / Certi	fications :				
Test Kit :		_ Serial # :		Model # :	
manufact Last Calibration Date		Company :			
I affirm that all informatio Connection Program and		is application is true and cor	rrect. I have read ar	nd shall abide by C	CCUSA's cu
Signature				Date	