

## Application for Forsyth Co. Backflow Prevention Assembly Tester

Complete the following application and fax to 770-781-2163 or

E-MAIL – mtburgess@forsythco.com

Forsyth Co. Water and Sewer

Cross Connection Control Specialist

110 East Main Street Suite 150

Cumming, Ga 30040

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Cell Phone # (Optional): \_\_\_\_\_  
(Check the one you want on the list)

Certification Training Institute: \_\_\_\_\_

Certification Expiration Date: \_\_\_\_\_ Backflow Tester Certification #: \_\_\_\_\_

Business License #: \_\_\_\_\_ County: \_\_\_\_\_

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Attach copies of:

Put on testers list (Y /N) Remove ( )

*Backflow Tester certification*

*Business License*

*Plumbers License (If a plumber)*  
*(Needed for repairing or installing backflows)*

*Certificate of liability Insurance*

*Test Kit certification*

*Confined Space Training Certification*

*Gas Monitor Certification.*

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Return all copies above before the company is certified to test in Forsyth County.

Copy of test must be sent to the customer within 5 business days of test. Failure to do so may result in testing privileges in Forsyth Co. to be suspended.

*All pressures for each check and discharge pressure must be recorded. If pressures are not recorded TEST will be returned to the owner of the device and will have to be tested again.*

Letters will not be sent for late certifications, business license, insurance or test kit certifications.  
If they are late you will be removed from list and not reinstated for 30 days after receiving them.