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: General Limited	Recertification Request Date
Inspector	
Method of Payment:	
Checks payable to GSWSA and Credit Cards (Visa	, Master Card & Discover) can be mailed to PO Box 2368, Conway
SC 29528 or e-mail information written below the	nat would allow us to process it electronically.

Checks Bank Name: Routing Number: Checking Account Number: Check Number:

Credit Card			
Credit Card Type:			
Credit Card Number:			
Exp. Date:			
CCV (security code on back):			

Date:		
Signature:		

If you have any questions please call or email:

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