

Application for Registering a Cross Connection Control Testers Certification Number (Licensing by the City of Regina)

- New Registration (Section A)
- Annual Re-registration (Section B)
- Change of Information (Residence/Employer/Contact Information)

Tester Information:			
Name:			
AWWA #:		AWWA Expiry Date:	
Primary Contact #:			
Email (Personal):			
Occupation:			
Address:			
City:			
Province:		Postal Code:	

Provide Serial Numbers of Calibrated Test Equipment Utilized by this Tester:		

Employer Information:			
Employer:			
Phone #:			
Contact # (Work):			
Email (Work):			
Address:			
City:			
Province:		Postal Code:	

The City of Regina publishes a list of certified companies on [our website](#) under [Water Quality and Protection](#). Do you wish your name and/or Company name to be included in our current commercial list of licensed cross connection control testers?

- YES
 NO



Section A: New Registration

Provide the following if registering for the first time.

- A copy of your **Cross Connection Control Specialist Certificate** issued by the AWWA Western Canada Section or approved equivalent (issue date within five years of application)
- A current **Cross Connection Control Accuracy Verification Report or Calibration Certificate** for Backflow Prevention Assembly Test Equipment

Section B: Annual Re-registration

Complete this section and provide the following if renewing your license.

- A current **Cross Connection Control Accuracy Verification Report or Calibration Certificate** for Backflow Prevention Assembly Test Equipment

Indicate the number of backflow preventers tested within the previous year (minimum of 6 required).

RP:

DCVA:

PVB:

List six serial numbers of Cross Connection Control devices tested within the previous year:

- | | |
|----|----|
| 1) | 2) |
| 3) | 4) |
| 5) | 6) |

Please forward completed application and the completed Accuracy Verification Report by mail to:

**Cross Connection Control Department (Building A)
 Queen Elizabeth Court II
 2476 Victoria Avenue
 PO Box 1790
 Regina, Sask S4P 3C8**

Or by email (PDF format) to: crossconnection@regina.ca

If submitting via email, the form must be signed by hand and scanned (digital signatures are not accepted at the present time for licensing and renewals).

Signature of Applicant:	Date: (YYYY MM DD)

FOR OFFICE USE ONLY			
Classification:	Approved:	Issue Date: (YYYY MM DD)	Renewal Date: (YYYY MM DD)
<input type="checkbox"/> ITR <input type="checkbox"/> S	<input type="checkbox"/> Y <input type="checkbox"/> N		