

CITY OF GRAND PRAIRIE REGISTRATION FOR CROSS-CONNECTION TESTING PLAIRIE

ENVIRONMENTAL SERVICES DEPARTMENT 206 WEST CHURCH STREET, 2ND FLOOR (75050) P.O. BOX 534045 GRAND PRAIRIE, TX 75053-4045 972-237-8055

Business Name:		Business Telephone:		
Address:	Cell/Direct Telephone:			
City:	State:		Zip:	
Manager of Operations:		Company Email:		
		Tester Email:		
Testers Driver's License Number:		State:	DOB/	
Parent Company Name, Address and p	phone (if applicable):			
Your completed application must be su	ubmitted along with c	opies of any license y	you may hold pertinent to your work:	
Cross-connection backflow prevention	assembly tester licen	se.		
Driver's license.				
Fire sprinkler contractor license. Lawn sprinkler contractor license.				
Copy of testing gauge calibration repo	rt within the last year			
Texas, and declare to accept and abide understand that falsification of any inf	by all pertinent ordir formation submitted in	ances and regulations the application shal	ntion devices in the City of Grand Prairie, in the City of Grand Prairie, Texas. If be cause for termination of the crossal basis for a fee of one hundred dollars	
SIGNATURE OF CERTIFIED TESTI	ER	SIGNATURE OF AI	PPROVING AUTHORITY	
DATE		EFFECTIVE DATE		
		EXPIRATION DAT		