BACKFLOW REGISTRATION FORM

THIS FORM MUST BE FILLED OUT COMPLETELY, RETURNED, AND APPROVED
PRIOR TO ANY TESTING OF ASSEMBLIES IN THE DISTRICT.
INCOMPLETE REGISTRATION PACKETS WILL NOT BE ACCEPTED.

CHECK ONE: ☐ NEW Registration ☐ RENEWAL Registration **Contractor #: _____**
Assigned By District

The applicant must personally appear and submit the completed Backflow Registration Form and required documentation to the **Seis Lagos Utility District 2730 Country Club Rd. Ste. E-1, Lucas, TX 75002**. A registration fee of $25.00 must accompany the required documentation. Make checks or money orders payable to "Seis Lagos Utility District."

Applicant Information: Please Print

Name: _____
Last First MI

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Cell Phone: (_____) _____ - _____ Other Phone: (_____) _____ - _____

Email Address: _____

Company Information: Please Print

Company Name: _____

Contact Name: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Office Phone: (_____) _____ - _____ Fax: (_____) _____ - _____

Email Address: _____

CHECKLIST:

☐ Completed Backflow Registration Form
☐ Annual Registration Fee - $25.00
☐ Valid Driver's License/Government ID
☐ Company's General Liability Insurance
☐ Backflow Prevention Assembly Tester License
☐ Backflow Annual Calibration Sheet
☐ Fire Sprinkler Certificate (SCR)
☐ Fire Company Letterhead Showing FT Employment

Seis Lagos Utility District must be the certificate holder. Minimum requirement of Bodily Injury and Property Damage each $1 million/per occurrence.

I hereby certify that I have read and fully understand the guidelines as set forth and this registration may be revoked and my privileges to work in the Seis Lagos Utility District forfeited for failure to comply with the guidelines in the Rates and Rules of the Seis Lagos Utility District.

Applicant Name (Print): _____ Applicant Signature: _____

Office Use Only: **Payment Received: ☐ Check ☐ Cash ☐ Money Order**

Received by: _____ **Date:** _____