



CITY OF PEORIA
Application for Recognition as a
Backflow Assembly Tester

READ ALL OF THESE INSTRUCTIONS AND QUESTIONS CAREFULLY BEFORE FILLING OUT THIS APPLICATION

1. All statements in this application are subject to investigation by the Division.
2. The application shall be typed or filled out in blue or black ink.
3. Improperly prepared or incomplete applications will be returned.
4. A separate form is required for each tester within your company/organization.

NEW TESTER: **RENEWAL:**

TESTER NAME: _____
COMPANY NAME: _____
MAILING ADDRESS: _____
EMAIL ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
PHONE: _____ **FAX:** _____ **CELL:** _____

EDUCATIONAL INFORMATION

COURSE NAME: _____ **MOST RECENT** _____
DATES ATTENDED: _____ **COURSE LOCATION:** _____
ASET CERTIFICATE NO: _____ **EXPIRATION DATE:** _____
AWWA CERTIFICATE NO: _____ **EXPIRATION DATE:** _____
ABPA CERTIFICATE NO: _____ **EXPIRATION DATE:** _____
PIPE CERTIFICATE NO: _____ **EXPIRATION DATE:** _____

TEST GAUGE INFORMATION

MAKE/MODEL: _____ **GAUGE SERIAL NO:** _____ **EXP:** _____
MAKE/MODEL: _____ **GAUGE SERIAL NO:** _____ **EXP:** _____
MAKE/MODEL: _____ **GAUGE SERIAL NO:** _____ **EXP:** _____
MAKE/MODEL: _____ **GAUGE SERIAL NO:** _____ **EXP:** _____

INSURANCE INFORMATION

INSURANCE CO: _____ **POLICY NO:** _____
LIABILITY AMOUNT: _____ **EXPIRATION DATE:** _____

CONTRACTORS PLUMBING LICENSE INFORMATION

LICENSE TYPE: _____ **LICENSE NO:** _____ **EXPIRES:** _____
LICENSE TYPE: _____ **LICENSE NO:** _____ **EXPIRES:** _____

CITY OF PEORIA TAX ID# _____ **EXPIRES:** _____

I hereby certify that this application contains no willful misrepresentations or falsification and the information given by me is true and complete to the best of my knowledge.

TESTER SIGNATURE: _____ **DATE:** _____

8401 W Monroe St
Peoria, Arizona 85345
(623) 773-8444 Office
(623) 773-8490 Fax

RECOGNIZED TESTER APPLICATION NEED TO KNOW INFORMATION

1. **Certified Tester Application** – A signed and completed Application for Recognition along with all required documentation must be submitted to the Cross Connection Specialist for approval. Upon approval, your Tester Company will be added to the Recognized Tester List and updated on the backflow prevention website at www.peoriaaz.gov/backflow . All businesses are directed to refer to the website list to employ the services of Peoria Recognized Testers.
2. **Annual Tester Information Update** – Each Tester Company will be required to resubmit an application and all required documentation due each year on the 28th of February to remain on the Recognized Tester List. Tester Companies who fail to submit the required documentation by the deadline will be suspended from testing in the City of Peoria for **30 days** effective from the date of the suspension letter.
3. **Backflow Assembly Test Report Submittals** – Test reports are due to the Cross-Connection Specialist no later than 30 days after completion of the final test. Inaccurate or incomplete test reports will not be accepted, and will be returned back to the Tester for correction by first class US mail. Disciplinary action may include a first offense written warning, a second offense written notice or a third offense **12 month** suspension.
4. **Complaints** – All complaints received will be evaluated on a case by case basis and documented within the Tester's permanent file. Each complaint evaluation conducted shall be disciplined according to the complaint severity, negligence or repeated violation of any portion of the Cross Connection Program. Disciplinary action may include a verbal warning, a written warning and/or a **12 month** suspension. Any single or combination of complaints may be disciplined by immediate suspension at the discretion of the Cross Connection Specialist and the Public Works-Utilities Department Manager.
5. **Suspension** – Upon completion of a suspension period, the Tester Company may resubmit all required documentation required in section one for review. Reinstatement shall be at the discretion of the Cross Connection Specialist and based on the nature of suspension and/or past disciplinary history.
6. **Permits** – When replacing stolen or defective backflow prevention assemblies, a permit must be obtained prior to installation. A test report must then be completed and submitted to this office with a pass rating. **The City of Peoria requires the installation of Lead Free devices.** The permit can be obtained at the City of Peoria Municipal Campus in the Development and Community Services Building located on 9875 N. 85th Ave. The fee for a permit is **\$75.00**. Only one permit is necessary for each address.

I hereby certify that this document has been reviewed and understood as a condition for consideration for Recognition as a Tester.

Tester Signature: _____