



# Ohio Department of Commerce

Division of Industrial Compliance & Labor

6606 Tussing Road • P.O. Box 4009

Reynoldsburg, Ohio 43068

(614) 644-3153 FAX (614) 995-1146

[www.com.ohio.gov](http://www.com.ohio.gov)

John R. Kasich

Governor

David Goodman

Director

## BACKFLOW TESTER CERTIFICATION APPLICATION

- A. All statements in this application are subject to investigation by the Ohio Department of Commerce, Division of Industrial Compliance, Backflow Section.
- B. The completed application shall be returned to the Ohio Department of Commerce, Division of Industrial Compliance, Backflow Section, 6606 Tussing Road, P. O. Box 4009, Reynoldsburg, Ohio 43068-9009.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number with Area Code: (    ) \_\_\_\_\_

**List: 5 years minimum experience and employed with a Plumbing, Hydronics, Fire Sprinkler Contractor or Water Purveyor.**

Company Name	Years	Phone Number
1. _____	_____	_____
2. _____	_____	_____

Current Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Trade: Plumbing (    )      Hydronics (    )      Fire Sprinkler (    )  
 OCILB: License # \_\_\_\_\_      License # \_\_\_\_\_      Classification # \_\_\_\_\_  
 OEPA license class I distribution or water treatment operator license # \_\_\_\_\_

**The applicant shall submit payment of One Hundred dollars (\$100.00) NON-REFUNDABLE for an application and examination fee.**

**Make checks payable to: Treasurer, State of Ohio**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office use only

Application fee paid Check # \_\_\_\_\_ Date: \_\_\_\_\_

Examination fee paid Check # \_\_\_\_\_ Date: \_\_\_\_\_

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