

NEW YORK STATE DEPARTMENT OF HEALTH – DST-NY, LLC
CROSS CONNECTION CONTROL BACKFLOW PREVENTION DEVICE TESTING CERTIFICATION COURSE

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CERTIFICATION AND RENEWAL NEW YORK STATE BACKFLOW PREVENTION DEVICE TESTER
COURSE HELD AT 1177 SUNRISE HIGHWAY, COPIAGUE, NY 11726

32 HOUR 4 DAY CERTIFICATE COURSE	8 HOUR 1 DAY RENEWAL CLASS
AUGUST 26-29 TH 2019 MON-THURS, 8AM-4PM	
OCTOBER 1-4 TH 2019 TUES-FRI, 8AM-4PM	
NOVEMBER 18-21 ST 2019 MON-THURS, 8AM-4PM	
	SEPTEMBER 24, 2019 TUES 8AM-4PM
	OCTOBER 7, 2019 MON, 8AM-4PM
	OCTOBER 22, 2018 TUES 8AM-4PM
	NOVEMBER 8, 2019 FRI, 8AM-4PM
	NOVEMBER 22, 2019 FRI, 8AM-4PM
	DECEMBER 9, 2019 MON, 8AM-4PM
	DECEMBER 20, 2019 FRI, 8AM-4PM

SPECIFY COURSE SCHEDULE FOR 4 DAY CERTIFICATION COURSE: _____

SPECIFY COURSE SCHEDULE FOR 1 DAY RENEWAL COURSE: _____

FIRST NAME: _____ LAST NAME: _____

COMPANY NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIPCODE: _____

WORK PHONE: _____ CELL PHONE: _____ HOME PHONE: _____

EMAIL ADDRESS: _____

IF SUBMITTING FOR RENEWAL, REGISTRATION # : _____ EXPIRATION DATE: _____

- 4 DAY COURSE: \$800.00
- 1 DAY RENEWAL COURSE: \$350.00

**NOTE: REGISTRATION EXPIRATION DATE CANNOT BE MORE THAN 1 YEAR FOR RENEWAL
BE SURE TO MAKE A COPY OF REGISTRATION FORM FOR YOURSELF**

CHECK IS MADE OUT TO DST-NY, LLC. MAIL TO: PO BOX 235, BETHPAGE, NY 11714

CONFIRMATION # WILL BE ISSUED UPON RECEIPT OF REGISTRATION FORM AND PAYMENT.

IF CLASS IS FULL YOU WILL BE NOTIFIED. REGISTRATIONS ARE BASED ON A FIRST COME, FIRST SERVE BASIS.

THERE ARE **NO** REFUNDS ONCE CONFIRMATION # IS ISSUED.

CANCELLATIONS AND DATE CHANGES MUST BE MADE WITHIN 4 BUSINESS DAYS OF YOUR SCHEDULED CLASS.

SIGNATURE: _____

DATE: _____