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| NEW YORK STATE DEPARTMENT OF HEALTH – DST-NY, LLCCROSS CONNECTION CONTROL BACKFLOW PREVENTION DEVICE TESTER CERTIFICATION COURSE |

PHONE 516-586-3840 (WEBSITE DSTOFNY.COM) EMAIL ADDRESS (DSTOFNY@GMAIL.COM)

CERTIFICATION AND RENEWAL NEW YORK STATE BACKFLOW PREVENTION DEVICE TESTER

**COURSE HELD AT 1177 SUNRISE HIGHWAY COPIAGUE, NY 11726**

 **32 HOUR 4 DAY CERTIFICATION COURSE 8 HOUR 1 DAY RENEWAL CLASS**

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| MAY 22, 23, 24, 25 2023 MONDAY-THURSDAY 8AM-4PM |  |
| JUNE 12, 13, 14, 15 2023 MONDAY-THURSDAY 8AM-4PM | JULY 11, 2023 TUESDAY 8AM-4PM |
|  | JULY 25, 2023 TUESDAY 8AM-4PM |
|  | AUGUST 8, 2023 TUESDAY 8AM-4PM |
|  | SEPT 5, 2023 TUESDAY 8AM-4PM |
|  | SEPT 19, 2023 TUESDAY 8AM-4PM |
|  | OCT 10, 2023 TUESDAY 8AM-4PM |
|  | OCT 24, 2023 TUESDAY 8AM-4PM |

SPECIFY COURSE SCHEDULE FOR 4 DAY CERTIFICATION COURSE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SPECIFY COURSE SCHEDULE FOR 1 DAY RENEWAL COURSE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOWN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_\_ZIP CODE\_\_\_\_\_\_\_\_

COMPANY NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TOWN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_\_\_ZIP CODE\_\_\_\_\_\_\_\_\_

WORK PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_HOME PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-MAIL ADDRESS FOR CONFIRMATION NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IF SUBMITTING FOR RENEWAL GIVE REGISTRATION NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_EXPIRATION DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4 DAY 32 HOUR COURSE $900.00**

**1 DAY 8 HOUR RENEWAL CLASS $350.00, RENEWAL CLASS DOES INCLUDE PRACTICE TIME.**

**BE SURE TO MAKE A COPY OF REGISTRATION FORM FOR YOURSELF**

**IF PAYING BY CHECK MAKE PAYABLE TO DST-NY, LLC MAIL CHECK & FORM TO PO BOX 235 BETHPAGE, NY 11714**

**DEPENDING WHEN RECEIVED AT POST OFFICE AND SEATING IS STILL AVIALABLE WE WILL EMAIL YOU A CONFIRMATION NUMBER.**

**IF PAYING BY CREDIT/DEBIT CARD CIRLCE IF BUSINESS CARD OR PERSONAL CARD EMAIL BACK FORM TO US.**

**DO NOT GIVE US YOUR CREDIT/DEBIT CARD INFO, WE WILL EMAIL YOU A CREDIT/DEBIT CARD INVOICE TO COMPLETE**

***THERE ARE NO REFUNDS ONCE CONFIRMATION # IS ISSUED, YOU MAY HOWEVER SWITCH TO ANOTHER CLASS.***

SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_