

	CROSS CONNECTION CONTROL QUALIFIED CONTRACTOR REGISTRATION APPLICATION	97 Hurontario Street Collingwood ON, L9Y 2L8 705-445-1030 x 3321 eorser@collingwood.ca

Applicant Information			
Business Name:			
Address:		Unit Number:	
City:	Province:	Postal Code:	
Phone number:		Fax Number:	
Business Email:			
Contact Name:		Cell phone number:	

Include business information including business name, phone number and email address on the Qualified Contractor Registry: Yes ☐ No ☐

Please indicate if application is for: Irrigation only ☐ Fire Systems Only ☐																								
Proof of the following documentation is required to be included on the Qualified Contractor Registry: Copy of OWWA Cross Connection Control Specialist Certification. Copy of trade or professional certificate for each specialist. Test Kit Certificate of Calibration for each test kit Proof of current liability insurance																								
Contractors to be included in the Qualified Contractor Registry																								
<table border="1"> <thead> <tr> <th>Cross Connection Specialists Name</th> <th>OWWA Certification Number</th> <th>Skills Trades Ontario ID #</th> <th>Skills Trades Expiration Date</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Cross Connection Specialists Name	OWWA Certification Number	Skills Trades Ontario ID #	Skills Trades Expiration Date																				
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Only approved Qualified Contractors are eligible to perform Installations, Repairs, Surveys and Testing within the Town of Collingwood as per the Town Of Collingwood Backflow Prevention By-law; as amended, and CSA B64 Standards.																								

Test Kits		
Test Kit Make and Model	Serial Number	Certification Date

Signature of Owner or Authorised Signatory:	Date:
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