BACKFLOW PREVENTION ASSEMBLIES REGISTRATION FORM

The Town has partnered with SC Tracking Solutions LLC, a web-based software tool, used to track, catalog, and confirm backflow prevention testers and their inspections. All testers must register all professional licenses through this **www.sctrackingsolutions.com**.

Backflow prevention assembly testers and Customer Service Inspectors must submit a current driver's license, gauge accuracy and/or calibration report, state license and professional documentation (individual and company). You will have an opportunity to upload documents during registration or send them to us via fax or email.

The fee for each backflow assembly tested is $25 plus state sales tax. This fee is paid upon entering the backflow prevention assembly test results in the online tool. Annual registration is $125 per tester paid on SCTS site. Follow the steps below to complete residential/commercial backflow assembly inspections in a timely manner.

COMPLETE THIS FORM FOR EACH NEW BACKFLOW PREVENTION ASSEMBLY

REMIT TEST FORMS TO SC TRACKING SOLUTIONS

- **PRIOR TO TESTING THE NEW BACKFLOW PREVENTION ASSEMBLIES** fax or email this completed document for each new assembly to (866) 866-410-1093 or **cs@sctrackingsolutions.com**. SC Tracking will validate and then upload the information for you.
- BPATs need to go to **www.sctrackingsolutions.com**. Click BPAT registration and complete the entire process. This process should not take more than a few minutes, if documentation is in order, and will only need to be completed one time with periodic updates as licenses or certifications expire.
- Please allow 24 hours for SC Tracking to validate your documentation with state and local databases.
- Once validation is complete you will receive a temporary password via email.
- SC Tracking will then email you a Catalog # for this address.
- You will then return to the website, log in using your email address and temporary password, type in the Catalog #, complete the test or tests that apply to you and check out. This will complete your obligation to this inspection and be copied to the Town. Maintain your test records per state law.
- A copy of the report will be emailed to your registered email and the designated Town representative upon completion of the test and checkout.

Address of New Assembly: _____Town:_____ Zip:_____

Building Owner Email: _____

Make: _____Model:_____ Size:_____ Serial Number: _____

Type: _____**(RPZ, DC, DCDA, PVB, SVB, RPZ II, DCDA II)**

Serves: Please Choose One - Irrigation

Location: _____

Tester Name: _____

Tester Email: _____

Please Circle One: Residential Commercial

****Email/Scan or Fax this form to SCTS Customer Service****

1500 Solana Blvd. Bld. 7 Ste. 7200 · Westlake, Texas 76262 · (817) 430-0941 · Fax (817) 430-1812