

# Backflow Certification Course

Dec 10 - 12, 2010

offered by

Plumbing-Heating-Cooling Contractors Association  
of Northern Virginia (PHCC of NV)



## General Information

The Backflow Certification Course, taught by Jim Yacovissi, meets requirements for backflow certification in Maryland, WSSC and Virginia. This course includes classroom instruction and a wet lab. Class size is limited to 15.

Candidates for a Virginia backflow certification card will be required to sit for the state exam following successful completion of this course. Candidates for initial certification must complete the entire 3-day course. Candidates for recertification must attend the second day of the full course to receive credit.

## Date, Time and Location,

Dec 10 - 12, 2010 7:30 a.m. - 5:30 p.m. each day  
PMPV Training Facility at SERVPRO of North Prince William Co.  
11430 Balls Ford Rd, Manassas, VA 20109

## Price

Full 3-Day Course: \$525 for PHCC and ACCA members; \$675 for non-members  
1-Day Recertification Class: \$275 for PHCC and ACCA members; \$325 for non-members

## Reservations and Payment

Enroll NOW! Space is limited to the first 15 people enrolled! **Reservations MUST be received no later than 10 days prior to the class start date.** No refunds or cancellations will be accepted, but substitutions may be made. No exceptions. **Complete this page and fax to (800) 947-7415 or mail with class fee to PHCC of No VA, P.O. Box 6143, Suffolk, VA 23433.** Questions, call Andrea Proper at (703) 368-4399.

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

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

## Select Your Class:

\_\_\_\_\_ Dec 10 - 12 -- Full Course      \_\_\_\_\_ Dec 11 -- Recertification

Are you a member of the following organization(s)? Check all that apply.

\_\_\_\_\_ PHCC of No. Va.      \_\_\_\_\_ Metro DC PHCC      \_\_\_\_\_ ACCA-NCC

Amount of Authorized Payment: \$ \_\_\_\_\_ Method of Payment (please check one):

\_\_\_\_\_ Check      \_\_\_\_\_ American Express      \_\_\_\_\_ MasterCard      \_\_\_\_\_ Visa

Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CID# \_\_\_\_\_ (3 digits on back)

Name on Card: \_\_\_\_\_ Auth. Signature: \_\_\_\_\_

Billing Address (If Different from Above) : \_\_\_\_\_