



WATER PROTECTION TECHNICIAN REGISTRATION APPLICATION
WATER SYSTEM ID# 2270001

ILLEGIBLE OR INCOMPLETE REPORTS WILL NOT BE ACCEPTED.

Documentation of licenses, endorsements, and certifications must accompany this application form.

Technician Information: Please Print

Name: Last First MI
Mailing Address:
City: State: Zip Code:
Home Phone: Cell Phone:
Email Address:

Employer Information:

Employer:
Mailing Address:
City: State: Zip Code:
Business Phone: Fax Number:

Licenses, Endorsements and Certifications:

- Backflow Prevention Assembly Tester License issued by the Texas Commission on Environmental Quality
Customer Service Inspector License issued by the Texas Commission on Environmental Quality
Plumbing License issued by the Texas State Board of Plumbing Examiners
Water Supply Protection Specialist Endorsement issued by the Texas State Board of Plumbing Examiners
Professional Engineering License issued by the Texas Board of Professional Engineers
Private Fire Hydrant Technician certified by Austin Water (or equivalent).

I, the undersigned, certify that the above information is true and correct. I agree to promptly inform the Special Services Division if any of the information on this page changes in the future.

Signature: Date:

Forward this report to: City of Austin, Special Services Division, 3907 South Industrial Drive, Ste. 100, Austin, TX 78744-1070
Phone # (512) 972-1060, Fax # (512) 972-1260
www.austintexas.gov/department/special-services-water-protection

