

# CERTIFICATION REQUEST FORM

Please provide as much information as possible on your request to insure promptness

<b>Job Name</b> _____ <b>Address</b> _____ <b>City</b> _____ <b>Zip Code</b> _____
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<b>Owner / End user</b> _____ <b>Phone #</b> (     ) _____ <b>Contact</b> _____
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<b>Contractor / Company</b> _____ <b>Address</b> _____ <b>City</b> _____ <b>Zip Code</b> _____ <b>Ph#</b> (     ) _____ <b>Fax#</b> (     ) _____ <b>Email Address</b> _____ <b>Field Contact</b> _____ <b>Ph#</b> (     ) _____
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<b>Product Info:</b> <b>Model #</b> _____ <b>Serial #</b> _____ The serial # is located inside the enclosure on the back board, it contains our Company Logo and phone number. It must be provided before the certification takes place <b>PLEASE CHECK IF ANY OF THE FOLLOWING OPTIONS ARE INSTALLED</b>  <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Rain Sensor</td> <td><input type="checkbox"/> Radio Remote Adaptor</td> <td><input type="checkbox"/> Radio Remote Card</td> </tr> <tr> <td><input type="checkbox"/> Surge Suppressor</td> <td><input type="checkbox"/> Master Valve Timer</td> <td><input type="checkbox"/> Master Valve Relay</td> </tr> <tr> <td><input type="checkbox"/> Pump Start Relay</td> <td><input type="checkbox"/> High Flow Shut-off</td> <td><input type="checkbox"/> Flow Sensor _____(Size)</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Other _____</td> </tr> </table>	<input type="checkbox"/> Rain Sensor	<input type="checkbox"/> Radio Remote Adaptor	<input type="checkbox"/> Radio Remote Card	<input type="checkbox"/> Surge Suppressor	<input type="checkbox"/> Master Valve Timer	<input type="checkbox"/> Master Valve Relay	<input type="checkbox"/> Pump Start Relay	<input type="checkbox"/> High Flow Shut-off	<input type="checkbox"/> Flow Sensor _____(Size)	<input type="checkbox"/> Other _____		
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<input type="checkbox"/> Other _____												

**Form of payment: PO# \_\_\_\_\_ Credit Card \_\_\_\_\_ Check/ Cash \_\_\_\_\_**  
 (please provide PO# or check one of the above options)

**The following items must be installed or completed before any certification request**

\_\_\_\_\_  
 (customer signature required)

- |  |  |
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| <input type="checkbox"/> <b>Concrete / Mounting Pads</b><br><input type="checkbox"/> <b>Conduit</b> (Electrical, Flow Sensor, Communication)<br><input type="checkbox"/> <b>Water Supply</b><br><input type="checkbox"/> <b>Flow Sensor</b> (if applicable)<br><input type="checkbox"/> <b>Pole Mount Equipment</b> (if applicable)<br><input type="checkbox"/> <b>Communication Cable</b> (if applicable)<br><input type="checkbox"/> <b>Specified Components and Cable</b> | <input type="checkbox"/> <b>Grounding</b> (Rods, Wire, Clamp)<br><input type="checkbox"/> <b>Power</b> (Provide per National Electric Code)<br><input type="checkbox"/> <b>Valve Wiring</b><br><input type="checkbox"/> <b>Flow Sensor Cable</b> (Per Specifications)<br><input type="checkbox"/> <b>Phone Line</b> (If applicable)<br><input type="checkbox"/> <b>Master Valve</b><br><input type="checkbox"/> <b>Master Valve Relay Wiring</b> |
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