

Interested in other training topics?

Phone in your requested topic and suggested instructor to the MRWA Office at (989) 539-4111 or Fax (989) 539-4055

Don't forget to mark your calendars for:

*MRWA Annual Management & Technical Conference
March 14 – 16, 2012
Grand Traverse Resort
Traverse City, MI*

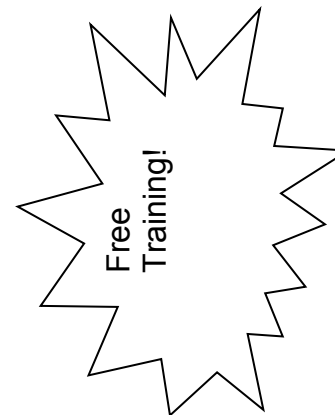
Visit National Rural Water Association at: www.nrwa.org

Michigan Rural Water Association
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www.mrwa.net
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Michigan Rural Water Association
P.O. Box 960
Harrison, MI 48625
(989) 539-4111



Water Supply Annual Cross-Connection Report Workshop

February 23, 2012

Crowne Plaza Hotel
2700 Sheraton Drive
Novi, MI 48377

March 1, 2012

Comfort Inn
2424 S. Mission St.
Mt. Pleasant, MI 498858

Instructed by:

Hydro Designs, Inc.
Cross-Connection Control Services
5700 Crooks Road, Suite 100
Troy, MI 48098
(800) 690-6651 or (248) 250-5000
(248) 250-5005 direct line
(248) 250-5055 direct fax
www.hydrodesignsinc.com

0.3 CECs, Water - Managerial



Water Supply Annual Cross-Connection Report Workshop

This course is especially designed to help local water utilities with annual reporting to MDEQ on the status of their cross-connection control program.

Class topics:

Introductions
Responsibilities
Definitions
Containment
Isolation
Water Supply Cross-
Connection Rules
Hands-On Workshop



AGENDA

8 a.m. to 8:30 a.m. Registration

8:30 a.m. – 9 a.m.
Introduction:
Water Supply Rules
Responsibilities

9 a.m. – 10 a.m.
Definitions
Containment/Isolation

10 a.m. – 11 a.m.
Review Annual Report

11 a.m. - Noon
Hands-On Workshop

All training materials included.

0.3 CECs, Water - Managerial

Space is limited.

A minimum of 10 participants is required for this class to be held.

Water Supply Annual Cross- Connection Report Workshop

Please "X":

_____ February 23, 2012, Novi, MI
_____ March 1, 2012, Mt. Pleasant, MI

Cost: **Free to MRWA Members**
\$75/person (non-members)

CALL (989) 539-4111 to
Pre-register

Pay instantly by credit card online!

Or, please send registration form with
check in the proper amount.

Name: _____

Employer: _____

Address: _____

*If paying by credit card, please visit our web site at
www.mrwa.net, to register online for training.

Phone: _____

Fax: _____

E-mail: _____

Amount Due: \$ _____

Number of People Attending: _____

Mail registrations to:

MRWA
P.O. Box 960
Harrison, MI 48625

No walk-ins, please
Return this portion of flyer with payment.