



# WATER LOSS AUDIT VALIDATOR CONTINUING EDUCATION CREDIT REPORT

INDIANA FINANCE AUTHORITY  
WATER RESOURCES & INFRASTRUCTURE  
PLANNING PROGRAM

FOR OFFICE USE ONLY
Water Loss Audit Validation CEU Approval Number
Maximum credit hours
Mail completed application to: Indiana Finance Authority Water Resources & Infrastructure Planning Program 100 N. Senate Avenue, Room 1275 Indianapolis, IN 46204 Or email it to: <a href="mailto:WaterResources@ifa.in.gov">WaterResources@ifa.in.gov</a>

INSTRUCTIONS: To ensure proper credit, print legibly

*This form must be completed in order for the attendee to get credit.*

*Send the form to IFA at the above address. The Training Provider must retain a copy of the completed form for their records.*

*Since this is a form of attendance verification, it is requested that this form be distributed during the latter portion of the training session. No credit will be considered when original signatures are not shown.*

Name of Certified Validator		Mailing address (number and street):		
City:	State:	ZIP code:	Work telephone number: (    )	
<input type="checkbox"/> Check here if this is a change of address.	Email address:		Home telephone number: (    )	

Title of training course:

Name of organization offering the course:

## CREDIT APPLIED TO WATER LOSS AUDIT VALIDATOR:

Validator certification number: **(Required)**

Date Attended: **(Required)**

Number of contact hours attended and verified: **(Required)**

Signature of instructor or training provider: **(Required)**

Signature of certified water loss audit validator: **(Required)**