

**Charlotte Department of Transportation
Street Maintenance**

Registration for Utility Cut Certification

Option 1: Fax completed form to: 704-336-6602

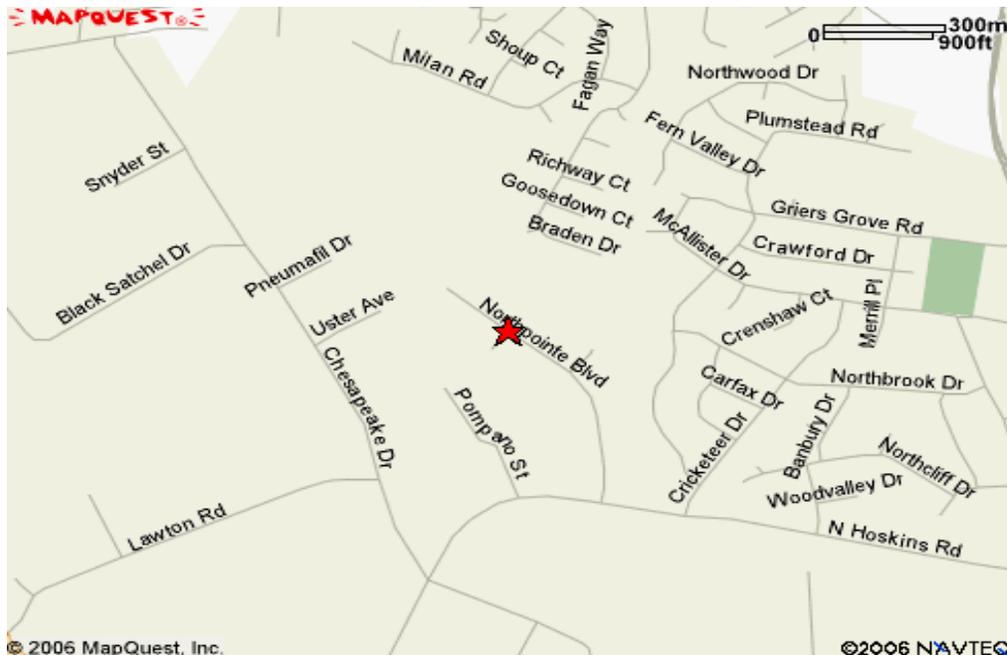
Option 2: Mail completed form to: Certification Class Registration
Attn: Financial Services
CDOT/Street Maintenance
4411 Northpointe Industrial Blvd
Charlotte, NC 28216

Make all checks payable to: The City of Charlotte

One registration needs to be completed for **each** participant.

Participant Name	
Title	
Company Name	
Company Address	
City	
State	
Zip	
Company Phone	
E-mail	

I am registering for the **Thursday, March 23, 2017 class**. Class will meet at the Northwest Facility of Street Maintenance, 4411 Northpointe Industrial Blvd. Charlotte. Enter through the Rogers Hall entrance. Class hours are 8:30 AM to 12:00 PM. Coffee provided. **Arrivals after 9:00 AM will be asked to reschedule.**



Rate	\$ 60.00 **PAYMENTS IN ADVANCE MUST BE RECEIVED AT LEAST ONE WEEK PRIOR TO THE CLASS. ONLY <u>CASH, OFFICIAL BANK CHECKS, OR MONEY ORDERS</u> WILL BE ACCEPTED THE DAY OF THE CLASS.
Cancellation Policy	Full refunds will be made if the registration cancellation is received, in writing, 10 or more business days prior to the start date of the class. No refund is available if the registration is cancelled nine or fewer business days prior to the start day of the class or if an attendee from your company/organization can be substituted at any time. Street Maintenance has the right to cancel the class if there are not enough participants registered and if weather conditions dictate the division needs to be on inclement weather conditions.

If you choose not to pay for registration in advance, we can invoice your company/organization for the fee for this class. If this is the case, please provide a purchase order (PO) number so we may process the invoice. Please make checks payable to: The City of Charlotte.

PO # _____

FULL PAYMENT MUST BE RECEIVED BEFORE OBTAINING YOUR CERTIFICATION

Accounts Payable Contact Information: (To whom should we send the invoice?)

Name: _____

Phone: _____

A/P Contact Email: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Confirmation will be emailed to you.

If you have any questions or comments, please contact Financial Services at 704-336-3200.