



State of Utah  
 Division of Drinking Water  
 Operator Certification Program  
**EXAM APPLICATION**

Division of Drinking Water (DDW) P.O. Box 144830 Salt Lake City, UT 84114-4830 <b>Phone:</b> (801) 536-4200 <b>E-mail:</b> DDWOpCert@utah.gov <a href="http://drinkingwater.utah.gov">http://drinkingwater.utah.gov</a>	Rural Water Association of Utah (RWAU) 76 Red Pine Drive Alpine, UT 84004 <b>Phone:</b> 801-756-5123 <b>Email:</b> rwau@rwau.net <a href="http://www.rwau.net">www.rwau.net</a>
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**Checklist Instructions**

<input type="checkbox"/> ONLINE Exam	<input type="checkbox"/> RWAU Exam	<input type="checkbox"/> AWWA Exam
<input type="checkbox"/> <b>Step 1</b> Fill out this form completely and get your proof of citizenship form (page 3) <i>notarized</i> .	<input type="checkbox"/> <b>Step 1</b> Fill out this form completely and get your proof of citizenship form (page 3) <i>notarized</i> .	<input type="checkbox"/> <b>Step 1</b> Fill out this form completely and get your proof of citizenship form (page 3) <i>notarized</i> .
<input type="checkbox"/> <b>Step 2</b> Be prepared to make payment of \$150 to RWAU prior to scheduling your proctor.	<input type="checkbox"/> <b>Step 2</b> Choose an exam date & location. <input type="checkbox"/> <b>Annual Conference</b> in St. George, UT <b>Exam:</b> 3/01/2019 <b>App Deadline:</b> 2/15/2019 <input type="checkbox"/> <b>Fall Conference</b> in Layton, UT <b>Exam:</b> 8/29/2019 <b>App Deadline:</b> 8/15/2019	<input type="checkbox"/> <b>Step 2</b> Submit application, notarized citizenship form, and pay the fee before the deadline on December 20, 2018.  <b>Exam Location</b> in West Jordan, UT 84088  <b>Exam:</b> 1/17/2019 <b>App Deadline:</b> 12/20/2018
<input type="checkbox"/> <b>Step 3</b> Contact RWAU to submit your application and payment and schedule your proctor.	<input type="checkbox"/> <b>Step 3</b> Send application and pay the \$200 exam fee to the DDW. The exam (DDW) and the conference (RWAU) are separate registrations.	<input type="checkbox"/> <b>Step 3</b> Send application and pay the <del>gzeo</del> fee to the DDW. The exam (DDW) and the training (AWWA) are separate registrations.

Need study help? Study materials are available online including study guides, presentations, math conversions, and pre-certification training screencast videos. <https://deq.utah.gov/Certification/certification/drinkingwater/StudyHelp.htm>

"In compliance with the American Disabilities Act, individuals with special needs (including auxiliary communicative aids and services) should contact Brittani Mitchell, Office of Human Resources, at: (801) 536-4285, TDD (801) 903-3978, at least five working days prior to the scheduled meeting."

**PERSONAL INFORMATION**

First, Middle, Last Name (Mr. or Ms.): \_\_\_\_\_ Certification #: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_ Cell phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home phone: \_\_\_\_\_

**GRADE LEVEL DESIRED**

Water Distribution: SS  1  2  3  4

Water Treatment: 1  2  3  4

Distribution includes chlorination, Treatment complete treatment of surface water.

**Distribution**

SS 25-500 population  
 D1 501-1,500  
 D2 1,501-5,000  
 D3 5,001-15,000  
 D4 > 15,001

**Treatment**

T1 25-1,500 population  
 T2 1,501-5,000  
 T3 5,001-15,000  
 T4 > 15,001

**CURRENT EMPLOYMENT**

Employer or Water System Name: \_\_\_\_\_ Water System #: \_\_\_\_\_

Address: \_\_\_\_\_ Water System Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Total years w/ employer: \_\_\_\_\_ Total years as DRC\* operator with this employer: \_\_\_\_\_ Are you a DRC\* operator now?  Yes  No

## CURRENT EMPLOYMENT

Job Title: \_\_\_\_\_

Duties of position: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PREVIOUS WATER INDUSTRY WORK EXPERIENCE

Water System Name & #	Years of Hands-On Experience	Years of DRC Experience	Job Duties	Contact

## UNRESTRICTED STATUS

Certain experience/education requirements need to be met to obtain an "unrestricted" certificate. If you do not meet these requirements, a "restricted" certificate will be issued. A "restricted" certificate signifies that you have passed the exam, but you lack the experience required by the Operator Certification Rules. Combine current and past experience.

"Mr. / Ms. \_\_\_\_\_ has \_\_\_\_\_ total years of water system experience  
(Operator)

and \_\_\_\_\_ years as a \_\_\_\_\_ \*Direct Responsible Charge (DRC) Operator  
(Treatment/Distribution)

with the \_\_\_\_\_ water system (Utah water system # \_\_\_\_\_)."

Supervisor's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Required)

## EDUCATION

What is the highest level of education you have completed?

HIGH SCHOOL DIPLOMA OR EQUIVALENT:

COLLEGE GRADUATE: Degree: \_\_\_\_\_ Major: \_\_\_\_\_ Year: \_\_\_\_\_

Operator's signature: \_\_\_\_\_

Date: \_\_\_\_\_

"By signing, I certify the above information is correct and complete.  
I understand that all info may be verified by Drinking Water Staff."

\*DRC (Direct Responsible Charge) - DRC means active daily on-site charge and performance of operation duties. The person in direct responsible charge is generally an individual who independently makes decisions during normal operation which can affect the sanitary quality, safety, and adequacy of water delivered to customers. In cases where only one operator is employed by the system, this operator shall be considered to be in direct responsible charge. In cases where more than one operator is employed, more than one operator may be in direct responsible charge.

# Proof of Citizenship

**Under Utah State Law** the Utah Department of Environmental Quality (DEQ) is required to verify the lawful presence in the United States of an individual at least 18 years of age (includes sole proprietor doing business under assumed name) who has applied for Water Operator certification or Backflow Technician certification. This law also applies for renewal, reinstatement, and reciprocity applications. *These documents will be confidential and not distributed publicly.*

Applicants for these certifications are required to notarize and attach the following documents:

- Complete and attach the form below
- Attach copy of your government issued photo ID
- Have the document notarized

**Questions?**  
**Division of Drinking Water**  
 195 North 1950 West  
 P.O. Box 144830  
 Salt Lake City, UT 84114-4830

**Phone:** (801) 536-4200

<http://drinkingwater.utah.gov>

*I've already submitted a citizenship form.*

## Utah Department of Environmental Quality Certification Pursuant to UCA 63G-12-104

**This paperwork must be:**

Completed prior to issuance of certificate.

I, \_\_\_\_\_, hereby certify under penalty of perjury that I am:  
*Full Name*

a United States citizen. *Must have copy of government issued photo ID attached.*

**OR**

a qualified alien as defined in 8 USC, Sec. 1641, and lawfully present in the United States.

*Alien ID #:* \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Applicant's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Government Issued

# PHOTO ID

**(Place copy here)**  
*(driver's license, passport, etc.)*

*(can attach copy, cut and tape, or print copy on back)*

\_\_\_\_\_  
**NOTARY PUBLIC**

My commission expires: \_\_\_\_\_