STATE OF UTAH		R		Application Form
DEPARTMENT OF ENVIRONMENTAL QUALITY				CERTIFICATION OF ONSITE
DIVISION OF WATER QUALITY				WASTEWATER TREATMENT &
PO BOX 144870, SALT LAKE CITY, UTAH 84	1114			SPOSAL SYSTEM PROFESSIONALS
http://www.waterquality.utah.gov	E (004)E06			ldress: wwopcert@utah.gov
Certification Telephone: (801)536-4344				
	<u> </u>	e to the "Division o		•
This application form is only fo Attendance at recertification trainir each level prior to certi A notarized Citizen/Alien ID cert	ng through the U	tah On-site Wastew or no more than 6	ater Trainir months afte	ng Center is required for expiration.
A. Name			Social Se	c. No. XXX-XX-
	me or Initial) (Last Name	e)		(Last 4 digits only)
B. Contact Information (You MU	JST notify the Div	vision of Water Qua	lity of addr	ess changes)
Primary Mailing Address (Required) - I	ndicate Type of A	ddress (Home, Busines	s , W ork , M ail	ng):
Business Name:			Business Ty	
(If part of primary mailing address)				(Consultant, Contractor, etc.)
(Primary Mailing Address – include PO Box, if required)		(City)		(State Abbr.) (Zip Code)
Alternate Address - Indicate Type or	f Address (Home, B	usiness, Work, Mailing)	:	
Business Name:	-		Business Ty	me:
(If part of alternate address)			,	(Consultant, Contractor, etc.)
(Alternate Address)		(City)		(State Abbr.) (Zip Code)
County of Business -			Include on th	e Maintenance Specialist List
(Only the first listed Co	unty of Business will be used f	or the web site list)		e multice specialist List
(Primary E-mail Address)		(Alternate E-mail Address)		
C. Phone Numbers - Indicate Type	e (H ome, B usiness, I			
Will be listed on Web Site) No	Area code) (Number)	Alternate Phone	e Type:	(Area code) (Number)
D. Renewal Certificate Request	t ed (/	A single certificate wi	ll be issued a	at the higher/highest level.)
Level 1- Attended Re-certification class		for Certificate No.		
		Date Attended) (Current Level 1 Certificate Number)		
Level 2- Attended Re-certification	on class	for Certificate No.		
	(Date Attende	d)	(Current Level 2 Certificate Number)	
Level 3- Attended Re-certification	on class	for Ce	ertificate No	
	(Date Attende	,		(Current Level 3 Certificate Number)
E. Applicant Signature - By signi		•		
have met the requirements of Utah Professional for the levels indicated				
maintain all lower classifications of c		Land that for Level	z anu Leve	3 Certifications 1 must
	line Payment			
	Number" is:			of Fee (must be preapproved)
A notarized Citizen/Alien ID certification	on form is attached,	or 🗌 previously sub	mitted	(Certification Program Use Only)
				ceipt No.
Applicant's Signature (Required)				Nount //Alien ID
			En	ered DB
Date				t No. pire Date

F:\ONSITE CERT\ONSITE FORMS\NEWE_ONSITERENEWAPP032416.pdf