

STATE OF UTAH

DEPARTMENT OF ENVIRONMENTAL QUALITY
DIVISION OF WATER QUALITY
PO BOX 144870, SALT LAKE CITY, UTAH 84114
https://deq.utah.gov/division-water-quality

Certification Telephone: (801)536-4344 - Fax: (801)536-4301 - Office located at: 195 N 1950 W, Salt Lake City, UT

RENEWAL APPLICATION FORM

CERTIFICATION OF ONSITE

WASTEWATER TREATMENT &
DISPOSAL SYSTEM PROFESSIONALS

Email Address: wwopcert@utah.gov

Submit Application & Fee payable to the "Division of Water Quality"

This application form is only for renewal or reinstatement of Onsite Professional certifications. Attendance at recertification training through the Utah On-site Wastewater Training Center is required for each level prior to certificate expiration or no more than 6 months after expiration. A notarized Citizen/Alien ID certification form is also required to be "on file" with the Division.

A. Name Social Sec. No. XXX-XX- (Required) (First Name) (Middle Name or Initial) (Last Name) (Last 4 digits only)

B. Contact Information (You MUST notify the Division of Water Quality of address changes)

Primary Mailing Address (Required) - Indicate Type of Address (Home, Business, Work, Mailing):

Business Name: Business Type: (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 of Address (Home, Business, Work, Mailing):

Business Name: Business Type: (If part of alternate address) (Consultant, Contractor, etc.)

(Alternate Address) (City) (State Abbr.) (Zip Code)

County of Business - Include on the Maintenance Specialist List (Only the first listed County of Business will be used for the web site list)

(Primary E-mail Address) (Alternate E-mail Address)

C. Phone Numbers - Indicate Type (Home, Business, Fax or Mobile)

Primary Phone Type: No. Alternate Phone Type: No. (Will be listed on Web Site) (Area code) (Number) (Area code) (Number)

D. Renewal Certificate Requested (A single certificate will be issued at the higher/highest level.)

Level 1- Re-certification class or Test out for Certificate No. (Date Attended) (Current Level 1 Certificate Number)

Level 2- Re-certification class or Test out for Certificate No. (Date Attended) (Current Level 2 Certificate Number)

Level 3- Re-certification class or Test out for Certificate No. (Date Attended) (Current Level 3 Certificate Number)

E. Applicant Signature - By signing this application, I attest that the above information is accurate and I have met the requirements of Utah Administrative Code R317-11 for renewal as an Onsite Systems Professional for the levels indicated above. I understand that for Level 2 and Level 3 certifications I must maintain all lower classifications of certifications.

\$25 Certificate Fee is Included Or, Online Payment "Order Number" is: Waiver of Fee (must be preapproved)

A notarized Citizen/Alien ID certification form is attached, or previously submitted

Applicant's Signature (Required)

Date

(Certification Program Use Only) Receipt No. Amount Cit/Alien ID Entered DB Cert No. Expire Date