

APPLICATION

**ENVIRONMENTAL CONSERVATION** 

Drinking Water and Groundwater Protection Division

# Application for Water System Operator Certification Class 2, 3, 4 and D

# Please type or neatly print.

Answer all of the questions. Incomplete forms will not be processed.

## **General Information**

| Name (First MI Last) |  |
|----------------------|--|
| Job Title            | Operator ID #                          |
| Email                |  |
| Phone                | Extension                              |
| FAX                  | mergency Phone (Pager, Cell, or other) |
| Address (Line 1)     |  |
| Address (Line 2)     |  |
| City                 |  |
| State                | ZIP                                    |
| Country (if not USA) | International Postal Code              |

# **Class of Certification Being Applied for**

| Please refer   | to the Vern  | nont Water Su   | oply Rule  | e, Secti  | ion 21-12  | 2 for info | prmation relative to water system  |    |
|----------------|--------------|-----------------|------------|-----------|------------|------------|------------------------------------|----|
| classification | n and specif | ic requirement  | s for cert | tificatio | on for ea  | ch class   | before completing this application | ۱. |
| Class 2        | Class 3      | Class 4*        | Class      | s D       |            |            |                                    |    |
|                | * Class      | 4 only check of | one: 🗌     | ]4A1      | <b>4</b> A | <b>4</b> B | ☐4C                                |    |
|                |              |                 |            |           |            |            |                                    |    |

## Basis for Action Required (please check only one)

| New Applicant for Certification in Vermont                     |  |  |
|--|--|--|
| Upgrading Present Certificate# Upgrading to Class              |  |  |
| Applying as Operator in Training (OIT) (see§21-12.6 of VT WSR) |  |  |
| Applying as a Provisional Operator (see§21-12.7 of VT WSR)     |  |  |
| Applying for Reciprocity: Name of State: Identification Number |  |  |

## **Education Requirement**

All applicants must have a minimum of a High School Education or Equivalent (GED). Please list your School Name, Location, and Graduation Year:

## Approved Credit Hours (Only for Recertification)

Attach copies of certificates, diplomas, etc., that are not already identified by the Drinking Water and Groundwater Protection Division.

#### **Experience and Employment**

Please include any Public Water System that you are currently operating. List the most recent position first, detailing experience, and employer name and address. Attach additional sheets if needed.

| Start and<br>End Dates<br>(Month & Year) | WSID # | Employer Name and Address; Duties |
|--|--------|-----------------------------------|
|  |        |                                   |
|  |        |                                   |
|  |        |                                   |
|  |        |                                   |
|  |        |                                   |

#### **Application Fee**

Class 2, 3, 4 & D initial Water Operator Certification Fee is \$80. (Keep fee separate; do not combine with other fees for the Division or Department.) Checks, postal money orders, or express money orders, payable to the STATE OF VERMONT are acceptable; PLEASE <u>DO NOT SEND CASH</u>!

| Amount Included | Check/Money Order # |  |
|-----------------|---------------------|--|
|-----------------|---------------------|--|

#### Fee Schedule

The fee below reflects Legislation enacted in H.769 of the year 2012 Legislative Session and effective 7/1/2012.

Water Operator Certification Fee Information:

The State Law requires that we collect a fee to cover the initial multi-year certification period. The Water Operator Certification Fee is **\$80** no matter when in the three-year period you become a Full Water System Operator.

All Operator-in-training and Provisional Certificates are valid for the time period equal to the minimum operator experience required or the Water Supply Rule, Subchapter 21- 12.

**Please include letter of recommendation from supervisor(s) for Provisional or Upgrade from Operator-In-Training Certificate to a full certificate.** This letter should include technical capabilities that the applicant has, understanding of the Water System and Water Supply Rule, and amount of time and certified operator that the applicant has been working under the direct supervision at the Water System.

## **Applicant's Statement Regarding Child Support and Vermont Taxes**

Title 15, Section 795 of the Vermont Statutes requires that the statement below must be completed by anyone applying for a water system operator certification. A water system operator certification *may not be issued or renewed* unless the applicant certifies that he or she is in good standing with respect to or in full compliance with a plan to pay any and all **child support** payable under a support order as of the date the application is filed. "Good standing" means that less than one-twelfth of the annual support obligation is overdue; or liability for any support payable is being contested in a judicial or quasi-judicial proceeding; or he or she is in compliance with a repayment plan approved by the office of child support or agreed to by the parties; or in the case of a licensee, the licensing authority finds that immediate payment of support would impose an unreasonable hardship (15 V.S.A. Section 795 (d)).

By law (32 VSA §3113) no agency of the State may issue or renew any license or other authority to conduct a trade or business (including a license to practice a profession) unless the applicant first certifies, under the pains and penalties of perjury, that he/she is in good standing with the Department of Taxes. A person is in good standing if no taxes are due, if the liability for any tax that may be due is on appeal, if the tax payer is in compliance with a payment plan approved by the Commissioner of Taxes, or in the case of a licensee, if the licensing authority finds that immediate payment of taxes due and payable would pose an unreasonable hardship (32 V.S.A. Section 3113 (g)).

#### STATEMENT OF APPLICANT

I hereby certify that I am not subject to any support order or I am subject to a support order and am in good standing with respect to or in full compliance with a plan to pay any and all **child support** due the State of Vermont as of the date of this application. I hereby certify, under the pains and penalties of perjury, that I am in good standing with respect to or in full compliance with a plan to pay any and all **taxes** due the State of Vermont as of the date of this application. I further certify that all information contained in this application is true and accurate to the best of my knowledge.

| Signature       | Date |
|-----------------|------|
| Print Name Here |      |

This (fact sheet/form/application) and related environmental information are available electronically at http://www.drinkingwater.vt.gov

> Drinking Water and Groundwater Protection Division 1 National Life Drive, Main Bldg Floor 2 Montpelier, VT 05620-3521 Toll free 1-800-823-6500 Out of State 1-802-338-4815 Fax 1-802-828-1541