State of California
STATE WATER RESOURCES CONTROL BOARD
OFFICE OF OPERATOR CERTIFICATION
P.O. Box 944212
Sacramento, CA 94244-2120
Phone: (916) 341-5819
Internet Address: www.waterboards.ca.gov/cwphome/opcert

APPLICATION FOR WASTEWATER TREATMENT
Plant Contract Operator Registration

I. THIS IS AN APPLICATION FOR: (Check appropriate box)

☐ Initial Registration ☐ Annual Renewal of Registration ☐ Replacement of Certificate of Registration

II. FEES	
Initial Registration Fee ……..…… $100.00	Renewal Registration Fee ……..…… $100.00
Number of Operator Employees ___ x $25.00 = _____	Number of Operator Employees ___ x $25.00 = _____
Total (Maximum Combined Fee is $500.00) = _____	Total (Maximum Combined Fee is $500.00) = _____
	☐ Late Fee (see instructions) ……..…. $50.00
	Total (Combined Fee plus Late Fee) ……..…= _____

Certificate Replacement Fee – Number of Certificates _____ x $30.00 = _____

III. CONTRACT OPERATOR INFORMATION:

A. Name of Person or Entity: _____

B. For Annual Renewals, List Your Contract Operator Registration Number Here: _____

C. Mailing Address: _____
(Street) *(City)*

_____
(County) *(State)* *(Zip Code)*

D. Contact Person Name: _____

Telephone Number: _____

IV. NAMES OF WASTEWATER TREATMENT PLANTS UNDER CONTRACT WITHIN CALIFORNIA

List the names and owners of the wastewater treatment plants under contract. A Contract Wastewater Treatment Plant Information Form must be completed for each plant listed.

Plant Name	Name of Public Agency Owner
1.	
2.	
3.	
4.	
5.	
6.	
7.	

The energy challenge facing California is real. Every Californian needs to take immediate action to reduce energy consumption. For a list of simple ways you can reduce demand and cut your energy costs, see our website at www.waterboards.ca.gov

V. ROSTER OF OPERATOR EMPLOYEES

List the names of all wastewater treatment plant operators you will be assigning to wastewater treatment plants in California. Also list their California wastewater operator certification numbers. Include operators-in-training.

NAMES OF OPERATORS *(Last)* *(First)* *(Middle)*	California Wastewater Certification Number

Attach additional pages as necessary to complete this roster

VI. SIGNATURE OF OWNER OR PRINCIPAL OF FIRM

I, the undersigned, certify that all statements made, and information contained in this application, are true and correct to the best of my knowledge and belief, and comply with the State of California Water Code Chapter 9, Section 13627.2. I understand that any omissions or misrepresentations may result in ineligibility for registration or revocation of any registration granted. I also consent to an investigation of employment records and other qualifications in related activities for the purposes of verification of information contained in this application.

_____ _____

(Please print or type name) *(Date)*

_____ _____

(Signature) *(Title)*

CONTRACT WASTEWATER TREATMENT PLANT INFORMATION

Please fill out one page for each treatment plant under contract.

I. WASTEWATER TREATMENT PLANT INFORMATION

A. Name of Contract Operator (From page 1, Section IIIA): _____

B. Name of Wastewater Treatment Plant Under Contract: _____

C. Wastewater Treatment Plant Address: _____
(Street) *(City)*

_____
(County) *(State)* *(Zip Code)*

D. Plant Phone Number: (___)_____ Chief Plant Operator Phone Number: (___)_____

E. Duration of Contract: _____ TO _____
(effective date) *(expiration date)*

F. Plant Classification: _____ G. Regional Board: _____

II. NAMES AND CALIFORNIA WASTEWATER NUMBERS OF ALL WASTEWATER TREATMENT PLANT OPERATORS EMPLOYED IN THE OPERATION OF THIS PLANT. LIST CHIEF PLANT OPERATOR FIRST.

NAMES OF OPERATORS *(Last)* *(First)* *(Middle)*	California Wastewater Certification Number

III. WASTEWATER TREATMENT PLANT OWNER INFORMATION

A. Agency Name: _____

B. Mailing Address: _____
(Street) *(City)*

_____
(County) *(State)* *(Zip Code)*

C. Owner Contact Person: _____

Telephone Number: (___)_____

IV. SIGNATURE OF WASTEWATER TREATMENT PLANT OWNER

I, the undersigned, certify that all statements made, and information contained on this page are true and correct to the best of my knowledge and belief, and comply with the State of California Water Code Chapter 9, Sections 1058 and 13626.

_____ _____
(Please print or type name) *(Date)*

_____ _____
(Signature) *(Title)*