

State Water Resources Control Board

D3 – D4 – D5 Certification Application

Complete this application ONLY if you have passed a D3, D4 or D5 examination within the last three (3) years and meet the minimum qualifications in work experience or education substitution as listed below

Grade	Minimum Qualifications for Certification
D3	<p>Successful completion of the Grade D3 operator examination within the three years prior to submitting the application for certification,</p> <p style="text-align: center;">AND:</p> <p>One year of operator experience working as a certified D2 operator, interim D3 or higher operator, or temporary D3 operator for a D2 system or higher or a system that prior to January 1, 2001 would have met the criteria for classification as a D2 system or higher</p> <p style="text-align: center;">AND:</p> <p>At least one additional year of operator experience working as a distribution operator (may be substituted with (1) or (2) below)</p>
D4	<p>Successful completion of the Grade D4 operator examination within the three years prior to submitting the application for certification,</p> <p style="text-align: center;">AND:</p> <p>At least one year of operator experience working as a certified D3 operator, interim D4 or higher operator, or temporary D4 operator for a D3 system or higher or a system that prior to January 1, 2001 would have met the criteria for classification as a D3 system or higher</p> <p style="text-align: center;">AND:</p> <p>At least three additional years of operator experience working as a distribution operator (may be substituted with (1) or (2) below)</p>
D5	<p>Successful completion of the Grade D5 operator examination within the three years prior to submitting the application for certification,</p> <p style="text-align: center;">AND:</p> <p>At least two years of operator experience working as a certified D4 operator, interim D5 or higher operator, or temporary D5 operator for a D4 or D5 system or higher or a system that prior to January 1, 2001 would have met the criteria for classification as a D4 or D5 system or higher</p> <p style="text-align: center;">AND:</p> <p>At least three additional years of operator experience working as a distribution operator (may be substituted with (1) or (2) below)</p>

Experience substitutions for certification, as referenced above.

1) A relevant degree earned at an accredited academic institution may be substituted as follows:

- Associate Degree or Certificate in Water or Wastewater Technology or Distribution that includes at least 15 units of physical, chemical, or biological science may be used to fulfill **1 year of additional operator experience**.
- Bachelor Degree in engineering or in physical, chemical, or biological sciences may be used to fulfill **1.5 years of additional operator experience**.
- Masters Degree in engineering or in physical, chemical, or biological sciences may be used to fulfill **2 years of additional operator experience**.

2) A certified operator may substitute, on a day-for-day basis, one additional year of operator experience working as a distribution operator with experience gained while working with lead responsibility for water quality or quantity related projects or research.

If you passed a D1 or D2 examination, simply complete and mail back the bottom portion of your examination pass letter with the proper fee.

State Water Resources Control Board

APPLICATION FOR D3 - D5 WATER DISTRIBUTION OPERATOR CERTIFICATION

OPERATOR NO.		COMMENTS		DATE RECEIVED:	
APPROVED FOR:	APPROVED BY:				
D3 D4 D5					
CERT DATED:	CERT SENT:				

PLEASE DO NOT WRITE ABOVE THIS LINE

1. Personal Information

NAME (last, first, middle initial)		DATE OF BIRTH (m/d/yr)		SOCIAL SECURITY NO.	
		/ /		- -	
MAILING ADDRESS (number and street)			CITY	STATE	ZIP CODE
WORK TELEPHONE NO. () EXT.		HOME/CELL TELEPHONE NO. ())		E-MAIL ADDRESS	

2. Certification Information

This application is for: (circle one)	D3	D4	D5	Examination passed: month/year
<u>OR</u> Discounted fee of: (if currently certified in WT)	\$120	\$140	\$140	Are you certified by the State of California as a distribution operator? Yes <input type="checkbox"/> No <input type="checkbox"/> Operator #
	\$90	\$105	\$105	Are you certified by the State of California as a treatment operator? Yes <input type="checkbox"/> No <input type="checkbox"/> Operator #
				Are you certified by the State of California as a wastewater operator? Yes <input type="checkbox"/> No <input type="checkbox"/> Operator #

3. Education – IF used as substitution for operator experience (Certificate/Degree must be in a relevant major and verified with a photocopy of an OFFICIAL TRANSCRIPT - see (1) (a), (b), or (c) on back of page)

CERTIFICATE/DEGREE HOLDER:	CERTIFICATE/DEGREE MAJOR:	DATE AWARDED:	OFFICIAL TRANSCRIPT INCLUDED:
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No

4. Experience -- to avoid delays in evaluation of your application the following documents MUST BE submitted for each timeframe of employment claimed for experience credit. (Please see the back page for minimum qualifications.)

Please initial (in space provided below) verifying requested attachments are included:

_____ A letter written, signed, and dated by your supervisor (on company letterhead) verifying: (1) **timeframe of employment** (mo/yr to mo/yr), (2) a detailed description of the specific **distribution operator duties performed**, (3) **number of hours** a week spent performing operator duties (Distribution/Treatment/Wastewater), (4) **classification of the system** where duties were performed, (5) **IF** applicable, your **designation** as either a **shift or chief operator** (see sample letter attached)

Attachments to this letter MUST INCLUDE:

- _____ A **copy of the letter** (or permit) from your regulatory field office that **classifies your distribution system** (D1-D5)
- _____ A copy of the **utility organization chart** which notes the employees' **names and position titles**
- _____ A copy of the **utility's official job description** (for the position you hold/held) outlining duties performed

5. Signature of applicant: I, the undersigned, certify that all statements made on this application and accompanying attachments are true and correct; that I understand that any misrepresentations may result in revocation of any certificate granted, pursuant to Section 106877 & Section 106878 of the Health and Safety Code.

Original Signature (No Black Ink)

Date

MINIMUM QUALIFICATIONS FOR CERTIFICATION FOR D3 TO D5

D3

- ★ Successful completion of the D3 exam within the past three years.
- ★ 1 year of operator experience working as a certified D2 operator in a D2 system or higher **AND**
- ★ 1 additional year of operator experience working as a distribution operator (may be substituted with (1) or (2) below)

D4

- ★ Successful completion of the D4 exam within the past three years.
- ★ 1 year of operator experience working as a certified D3 operator at a D3 system or higher **AND**
- ★ 3 additional years of operator experience working as a distribution operator (may be substituted with (1) below)

D5

- ★ Successful completion of the D5 exam within the past three years.
- ★ 2 years of operator experience working as a certified D4 operator at a D4 system or higher **AND**
- ★ 3 additional years of operator experience working as a distribution operator (may be substituted with (1) below)

Experience substitutions for certification:

- (1) a degree earned at an accredited academic institution may be substituted as follows:
 - (a) Associate Degree or Certificate in Water or Wastewater Technology or Distribution that includes at least 15 units of physical, chemical, or biological science may be used to fulfill **1 year of general operator experience**.
 - (b) Bachelor's Degree in engineering or in physical, chemical, or biological sciences may be used to fulfill **1.5 years of general operator experience**.
 - (c) Master's Degree in any of the majors listed in (b) may be used to fulfill **2 years of general operator experience**.
- (2) A certified operator may substitute, on a day-for-day basis, experience gained while working with lead responsibility for water quality or quantity related projects.

Mail **completed application and filing fee**, including **all requested attachments** to:

**State Water Resources Control Board
Drinking Water Operator Certification Program
P.O. Box 944212
Sacramento, CA 94244-2120**

- (A) A check or money order made out to **SWRCB-DWOCP**.
- (B) If you are not sure of the requirements for a particular grade, contact this office for clarification before submitting your application as **FILING FEES ARE NON-REFUNDABLE**.