

EXAMINATION APPLICATION FOR LICENSE TO OPERATE
SECTION I: APPLICANT INFORMATION

•Place an "X" in one of the boxes indicating the type and classification of the license for which you qualify to take an examination

Public Water Distribution System – Lic. Class W-1
Public Water Distribution System – Lic. Class W-2
Public Water Distribution System – Lic. Class W-3
Public Water Distribution System – Lic. Class W-4

Industrial Wastewater Treatment System – Lic. Class N-1
Industrial Wastewater Treatment System – Lic. Class N-2
Industrial Wastewater Treatment System – Lic. Class N-3
Industrial Wastewater Treatment System – Lic. Class N-4

Public Water Treatment System – Lic. Class T-1
Public Water Treatment System – Lic. Class T-2
Public Water Treatment System – Lic. Class T-3
Public Water Treatment System – Lic. Class T-4

Public Wastewater Collection System – Lic. Class C-1
Public Wastewater Collection System – Lic. Class C-2
Public Wastewater Collection System – Lic. Class C-3
Public Wastewater Collection System – Lic. Class C-4

Very Small Water System – Lic. Class VSWS

Public Wastewater Treatment System – Lic. Class S-1
Public Wastewater Treatment System – Lic. Class S-2
Public Wastewater Treatment System – Lic. Class S-3
Public Wastewater Treatment System – Lic. Class S-4

All statements made in this application, as well as any documents submitted as supporting evidence of qualification for this examination, are subject to investigation and verification. Falsification or misstatement of any material fact will be cause for rejection. Failure of the applicant to furnish all information and records requested may result in rejection of the application.

Name _____
First MI Last

Address _____
No. & Street

_____ *City State County Zip Code*

Home Phone No. () _____ Work Phone No. () _____ Mobile Phone No. () _____

| |
|---|
| *CHECK NO.: _____ *CHECK DATE: _____ |
| *EMAIL ADDRESS _____ <i>* required field</i> |

Are you current licensed in another State and seeking a reciprocal license? Yes No
If yes, you must submit a copy of your valid out of state license _____

Have you previously filed an application for a license with the Department of Environmental Protection? Yes No
If yes, include date and type of license _____

Have you previously taken a Department of Environmental Protection examination for a license? Yes No
If yes, how many times? _____

CERTIFICATION OF APPLICANT

I hereby certify that there are no misrepresentations in my answers to the questions on this application.

Signature _____ Date _____