



State of Delaware  
Department of Natural Resources  
& Environmental Control  
**Division of Water**

Board of  
Certification

89 Kings Highway  
Dover, Delaware 19901

Phone: (302) 739-9946  
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**APPLICATION FOR RENEWAL  
WASTEWATER TREATMENT PLANT OPERATOR**

*Application Must Be Complete, Typewritten or Clearly Printed*

OPERATOR INFORMATION				
Prefix	First Name	Middle Name	Last Name	Suffix
Street Address				
Mailing Address (if different than Street Address)				
City		State	Zip	
Home Telephone Number		Mobile Telephone Number		
E-Mail Address			License Expiration Date	
DE Wastewater Operator License Number		Wastewater License Level <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> OIT		
CURRENT EMPLOYMENT INFORMATION				
Name of Employer		Telephone Number		
Street Address				
Mailing Address (if different than Street Address)				
City		State	Zip	
Name of Plant or Service Area		DNREC Classification of WWTF		
Dates of Employment at Facility		Dates of Employment as Wastewater Operator		
Description of Work Performed				
Level of Responsibility				
Name of Supervisor		Title	E-Mail Address	

