



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
Fax: (302) 739-8369

**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	
Telephone Number			E-Mail Address	
License Number	License Level <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> OIT		Renewal Date (mm/dd/yy)	
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

