Utah Division of Drinking Water

Operator Certification Program

RECIPROCITY APPLICATION

-OFFICE USE-
☐Approved Denied☐
Comments:

Division of Drinking Water
Operator Certification Program
195 North 1950 West
P.O. Box 144830
Salt Lake City, UT 84114-4830

Phone: (801) 536-4200
Fax: 801-536-4211
E-mail: kdyches@utah.gov

http://drinkingwater.utah.gov

Checklist Instructions:

☐ **Step 1** Fill out this form completely.

☐ **Step 2** Contact us to begin the process.
- ☞ *801-536-4202* (*Operator Certification Program Manager*)
- ☞ or send completed application to *kdyches@utah.gov*
- ☞ Reciprocity is reviewed on a case-by-case basis.

☐ **Step 3** Once your request has been approved, continue to step 4.

☐ **Step 4** If reciprocity is granted, pay the $100 fee.
- ☞ Pay online at *http://www.deq.utah.gov/FeesGrants/fees/drinkingwater/shoppingcart.htm*

PERSONAL INFORMATION

First, Middle, Last Name (Mr. or Ms.)**:**_____ **Certification #:**_____

Email address:_____ **Date of Birth:**_____

Home Address: _____ **Cell phone:**_____

City: _____ **State:** _____ **Zip:**_____ **Home phone:**_____

CERTIFICATE NEEDING RECIPROCITY

Water Distribution Grade $100**:** SS☐ 1☐ 2☐ 3☐ 4☐

Water Treatment Grade $100**:** 1☐ 2☐ 3☐ 4☐

Certificate(s) currently held in State of: _____
(*Washington, Colorado, Florida, etc.*)

OTHER LICENSES HELD

☞Plumber's license, cross connection certificate, etc.

_____

_____

_____

CURRENT EMPLOYMENT

Employer or Water System: _____ **Water System #:**_____

Address:_____ **Phone:**_____

City: _____ **State**:_____ **Zip code**:_____ **Fax:**_____

Job Title:_____
Duties of position:

_____

_____

_____

_____

Total years in position: _____
Total years w/ employer:_____

Are you a DRC* operator now? ☐Yes No☐
Total years as DRC* operator w/ employer:_____

**DRC (Direct Responsible Charge) - DRC means active daily on-site charge and performance of operation duties. The person in direct responsible charge is generally an individual who independently makes decisions during normal operation which can affect the sanitary quality, safety, and adequacy of water delivered to customers. In cases where only one operator is employed by the system, this operator shall be considered to be in direct responsible charge. In cases where more than one operator is employed, more than one operator may be in direct responsible charge.*

IF YOU HAVE ADDITIONAL WATER-RELATED EXPERIENCE WITH OTHER EMPLOYERS:

Duplicate this page or the above section and fill it out for those employers.

EDUCATION

What is the highest level of education you have completed?

GRADE SCHOOL: ☐ **HIGH SCHOOL:** ☐

COLLEGE GRADUATE: Degree:_____ Major:_____ Year:_____

Degree:_____ Major:_____ Year:_____

Applicant's Signature:_____ ***Date***:_____

"By signing, I certify the above information is correct and complete.
I understand that all info might be verified by Drinking Water Staff."