



DRINKING WATER

Utah Division of Drinking Water Operator Certification Program WRITTEN EXAM APPLICATION

- OFFICE USE -

<input type="checkbox"/> U	<input type="checkbox"/> R
<input type="checkbox"/> exp	<input type="checkbox"/> DRC
Location:	

⊗ DO NOT use this form for Rural Water or Online exams!

Checklist Instructions:

- Step 1** Fill out the application form completely.
 - ☞ Official correspondence will be mailed to you at the home address you provide on this page.
- Step 2** Get your proof of citizenship form (*page 3*) notarized.
- Step 3** Pay the fee.
 - ☞ <http://www.deq.utah.gov/FeesGrants/fees/drinkingwater/shoppingcart.htm>
 - ☞ Click **"Pay Online"** to add the \$100 examination to your shopping cart and complete the online payment process.
- Step 4** Send the application (*including notarized citizenship form*) and fee (*or fee receipt*) to the Division of Drinking Water (information in box).

**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: dmjacob@utah.gov

<http://drinkingwater.utah.gov>

We need both completed application AND payment/payment receipt so we can order an exam booklet for you well before the exam.

Need study help? Study materials are available online including study guides, presentations, math conversions, and pre-certification training screencast videos. ☞ <http://www.deq.utah.gov/Certification/certification/drinkingwater/certifiedoperators.htm>

Individuals with special needs must schedule a separate, private exam date and time. "In compliance with the American Disabilities Act, individuals with special needs (including auxiliary communicative aids and services) should contact Ashley Nelsen, Office of Human Resources, at: (801) 536-4412, TDD (801) 903-3978, at least five working days prior to the scheduled meeting."

PERSONAL INFORMATION

First, Middle, Last Name (Mr. or Ms.): _____ **Date of Birth:** _____

Certification #: _____ **Email address:** _____

Home Address or PO Box: _____ **Cell phone:** _____

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

GRADE LEVEL DESIRED

Water Distribution \$100: SS 1 2 3 4

Water Treatment \$100: 1 2 3 4

☞ **Distribution** includes chlorination, **Treatment** complete treatment of surface water.

☞ **Definitions:** SS - small system (water systems serving a pop. of 25-500); GRADE 1 (pop. <1,500); GRADE 2 (pop. 1,501 to 5,000); GRADE 3 (pop. 5,001 to 20,000); GRADE 4 (pop. >20,000).

CURRENT EMPLOYMENT

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

Address or PO Box: _____ **Fax:** _____

City: _____ **State:** _____ **Zip:** _____ **Phone:** _____

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

CURRENT EMPLOYMENT

Job Title: _____

Duties of current position:

**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 want credit as a Direct Responsible Charge (DRC) operator, have your supervisor fill out and sign this section below:

<p>“Mr. / Ms. _____ has _____ total years of water system experience and _____ years as a _____ (Treatment and/or Distribution) Direct Responsible Charge Operator with the _____ water system (Utah water system # _____).”</p> <p>Supervisor's signature: _____ Date: _____</p>

PREVIOUS WATER INDUSTRY WORK EXPERIENCE

Water System Name & #	Years of Hands-On Experience	Years of DRC Experience	Job Duties	Contact

EDUCATION

What is the highest level of education you have completed?

GRADE SCHOOL: HIGH SCHOOL:

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

EXAM PREFERENCES

Exam date chosen: (month/day/year): _____

check drinkingwater.utah.gov or contact us for dates

Fall date 2017 and onward only held in Salt Lake City

Choose a testing location:

The exact location address will be in your exam confirmation letter.

- | | | | |
|---------------------------------------|-------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Brigham City | <input type="checkbox"/> Logan | <input type="checkbox"/> Park City | <input type="checkbox"/> Salt Lake City |
| <input type="checkbox"/> Cedar City | <input type="checkbox"/> Monticello | <input type="checkbox"/> Price | <input type="checkbox"/> St. George |
| <input type="checkbox"/> Clearfield | <input type="checkbox"/> Nephi | <input type="checkbox"/> Provo | <input type="checkbox"/> Tooele |
| <input type="checkbox"/> Heber City | <input type="checkbox"/> Ogden | <input type="checkbox"/> Richfield | <input type="checkbox"/> Vernal |

Operator's signature: _____

Date: _____

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

Proof of Citizenship

Under Utah State Law the Utah Department of Environmental Quality (DEQ) is required to verify the lawful presence in the United States of an individual at least 18 years of age (includes sole proprietor doing business under assumed name) who has applied for Water Operator certification or Backflow Technician certification. This law also applies for renewal, reinstatement, and reciprocity applications. *These documents will be confidential and not distributed publicly.*

Questions?
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 Salt Lake City, UT 84114-4830

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Applicants for these certifications are required to notarize and attach the following documents:

- Complete and attach the form below
- Attach copy of your government issued photo ID
- Have the document notarized

I've already submitted a citizenship form.

*Utah Department of Environmental Quality
 Certification Pursuant to UCA 63G-12-104*

I, _____, hereby certify under penalty of perjury that I am:

a United States citizen. *Must have copy of government issued photo ID attached.*

OR

a qualified alien as defined in 8 USC, Sec. 1641, and lawfully present in the United States.

Alien ID #: _____

Dated this _____ day of _____, 20____.

Applicant's Full Name: _____

Address: _____

Applicant's Signature: _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.

Government Issued
PHOTO ID

(Place copy here)
(driver's license, passport, etc.)

NOTARY PUBLIC – *do not sign if no photo ID copied*

My commission expires: _____

This paperwork must be:

- Completed prior to issuance of certificate.
- For backflow technicians: submitted to exam proctor at the time of the scheduled written exam.