

Water Supply Division

**Application for Water System Operator Certification  
Class 2, 3, 4 and D**

**Please type or neatly print.**

Answer all of the questions. Incomplete forms will not be processed.

**General Information**

Name (First MI Last) [ ]	
Job Title [ ]	Operator ID # [ ]
Email [ ]	
Phone [ ]	Extension [ ]
FAX [ ]	Emergency Phone (Pager, Cell, or other) [ ]
Address (Line 1) [ ]	
Address (Line 2) [ ]	
City [ ]	
State [ ]	ZIP [ ]
Country (if not USA) [ ]	International Postal Code [ ]

**Class of Certification Being Applied for**

Please refer to the Vermont Water Supply Rule, Section 21-12 for information relative to water system classification and specific requirements for certification for each class before completing this application.

- Class 2  
  Class 3  
  Class 4\*  
  Class D  
 \* Class 4 only check one:  
  4A1  
  4A  
  4B  
  4C

**Basis for Action Required** (please check only one)

<input type="checkbox"/>	New Applicant for Certification in Vermont
<input type="checkbox"/>	Upgrading Present Certificate# [ ] Upgrading to Class [ ]
<input type="checkbox"/>	Applying as Operator in Training (OIT) (see§21-12.6 of VT WSR)
<input type="checkbox"/>	Applying as a Provisional Operator (see§21-12.7 of VT WSR)
<input type="checkbox"/>	Applying for Reciprocity: Name of State: [ ] Identification Number [ ]

**Education Requirement**

All applicants must have a minimum of a High School Education or Equivalent (GED). Please list your School Name, Location, and Graduation Year: [ ]

**Approved Credit Hours (Only for Recertification)**

Attach copies of certificates, diplomas, etc., that are not already identified by the Water Supply Division.

### Experience and Employment

Please include any Public Water System that you are currently operating. List the most recent position first, detailing experience, and employer name and address. Attach additional sheets if needed.

Start and End Dates (Month & Year)	WSID #	Employer Name and Address; Duties

### Application Fee

Class 2, 3, 4 & D see fee schedule below. (Keep fee separate; do not combine with other fees for the Division or Department.) Checks, postal money orders, or express money orders, payable to the STATE OF VERMONT are acceptable; PLEASE DO NOT SEND CASH!

- **No operator certification fees are required for any Vermont PCWS or NTNC operator who operates a water system serving a population of 3300 or fewer persons. These fees are being paid under the EPA water operator expense reimbursement grant effective 1/1/2002 through 12/31/2008**

Amount Included		Check/Money Order #	
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### Fee Schedule

The fees below reflect Legislation enacted in H.496 of the year 2001 Legislative Session and effective 7/1/01.	
PRO-RATED fees for LESS THAN the three-year renewal period	
1 Year - \$24	1.5 Years - \$36
2 Years - \$48	2.5 Years - \$60
3 Years - \$70	
All Operator-in-training and Provisional Certificates are valid for the time period equal to the minimum operator experience required or the Water Supply Rule, Subchapter 21- 12.	
Water Operator Certification Fee Information	
The State Law requires that we collect a fee to cover the initial multi-year certification period, which period varies with each class. Since the fee identified by law covers a three year period, certifications less than the three full years result in fees that are pro-rated on that basis.	
The fees for full 3 years renewals are:	
Class 2	\$70 (expires on June 30, 2008)
Class 3	\$70 (expires on June 30, 2010)
Class4 (All)	\$70 (expires on June 30, 2008)
Class D	\$70 (expires on June 30, 2010)
Please include letter of recommendation from supervisor(s) for Provisional or Upgrade from Operator-In-Training Certificate to a full certificate. This letter should include technical capabilities that the applicant has, understanding of the Water System and Water Supply Rule, and amount of time and certified operator that the applicant has been working under the direct supervision at the Water System.	

## Applicant's Statement Regarding Child Support and Vermont Taxes

Title 15, Section 795 of the Vermont Statutes requires that the statement below must be completed by anyone applying for a water system operator certification. A water system operator certification *may not be issued or renewed* unless the applicant certifies that he or she is in good standing with respect to or in full compliance with a plan to pay any and all **child support** payable under a support order as of the date the application is filed. "Good standing" means that less than one-twelfth of the annual support obligation is overdue; or liability for any support payable is being contested in a judicial or quasi-judicial proceeding; or he or she is in compliance with a repayment plan approved by the office of child support or agreed to by the parties; or in the case of a licensee, the licensing authority finds that immediate payment of support would impose an unreasonable hardship (15 V.S.A. Section 795 (d)).

By law (32 VSA §3113) no agency of the State may issue or renew any license or other authority to conduct a trade or business (including a license to practice a profession) unless the applicant first certifies, under the pains and penalties of perjury, that he/she is in good standing with the Department of Taxes. A person is in good standing if no taxes are due, if the liability for any tax that may be due is on appeal, if the tax payer is in compliance with a payment plan approved by the Commissioner of Taxes, or in the case of a licensee, if the licensing authority finds that immediate payment of taxes due and payable would pose an unreasonable hardship (32 V.S.A. Section 3113 (g)).

### STATEMENT OF APPLICANT

I hereby certify that I am not subject to any support order or I am subject to a support order and am in good standing with respect to or in full compliance with a plan to pay any and all **child support** due the State of Vermont as of the date of this application. I hereby certify, under the pains and penalties of perjury, that I am in good standing with respect to or in full compliance with a plan to pay any and all **taxes** due the State of Vermont as of the date of this application. I further certify that all information contained in this application is true and accurate to the best of my knowledge.

Signature	Date <span style="background-color: gray; color: gray;">          </span>
Print Name Here <span style="background-color: gray; color: gray;">          </span>	Social Security # <span style="background-color: gray; color: gray;">          </span>

This application and related environmental information are available electronically via the internet. For information visit us through the Vermont Homepage at <http://www.vermont.gov> or visit VT WSD directly at <http://www.vermontdrinkingwater.org>

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