

FINAL - APPROVED 2017

**Board for Waterworks and Wastewater Works Operators and Onsite Sewage System Professionals
 ONSITE SEWAGE SYSTEM OPERATOR LICENSE APPLICATION
 Fee \$100.00**

A check or money order payable to the TREASURER OF VIRGINIA,
 or a completed credit card insert must be mailed with your application package.
APPLICATION FEES ARE NOT REFUNDABLE.

Select the one license type requesting:

License Type	Initial	Trans	Upgrade	Trans
Journeyman Conventional Onsite Sewage System Operator	<input type="checkbox"/>	1005	<input type="checkbox"/>	<input type="checkbox"/>
Master Conventional Onsite Sewage System Operator*	<input type="checkbox"/>	####	<input type="checkbox"/>	####
Journeyman Alternative Onsite Sewage System Operator	<input type="checkbox"/>	1006	<input type="checkbox"/>	9015
Master Alternative Onsite Sewage System Operator*	<input type="checkbox"/>	####	<input type="checkbox"/>	####

* Master applicants will be authorized to take the applicable examination upon approval of this application.

- Do you hold a **current** or **expired onsite sewage system operator** license? (This includes interim licensees.)
- No
- Yes If yes, list your license number and expiration date.

VA License Number

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 Expiration Date _____

1. Full Legal Name (As it appears on your government issued ID or other legal documentation.)

Last (required) First (required) Middle Generation

2. Provide at least **one** of the following identification numbers*:

Social Security Number and/or

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Virginia DMV Control Number

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- Enter the same identification number as used on examination, previous applications or licenses on file with the department.
- * State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

3. Date of Birth _____ (Must be at least 18 years of age.)

MM/DD/YYYY

4. Maiden or Former Name(s) _____

5. Mailing Address (PO Box accepted) _____

The mailing address will be printed on the license.

City _____ State _____ Zip Code _____

6. Street Address (PO Box not accepted) Check here if Street Address is the same as the Mailing Address listed above.

PHYSICAL ADDRESS REQUIRED

City _____ State _____ Zip Code _____

7. Contact Numbers _____

Primary Telephone

Alternate Telephone

Fax

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OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	1942	FILE #/LICENSE #	ISSUE DATE
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8. Email Address

Email address is considered a public record and will be disclosed upon request from a third party.

9. Do you hold a current or expired onsite sewage system operator license, certification or registration issued by any state or jurisdiction within the United States or its territories (excluding Virginia)?

No

Yes If yes, complete the following table:

State/Jurisdiction	License, Certification or Registration Number	Expiration Date

10. Are you applying for a journeyman conventional onsite sewage system operator license?

No

Yes If yes, do you have 6 months of full-time experience* assisting with the operation and maintenance of conventional or alternative onsite sewage systems?

No If no, you do not qualify for this license type.

Yes If yes, complete the **Experience Verification Form**.

* *Experience Verification Form* must be verified by one or more of the following individuals: onsite soil evaluator, a master onsite sewage system operator, a professional engineer, or an authorized onsite soil evaluator certified by VDH before July 1, 2009.

➤ Skip to question 14.

11. Are you applying for a master conventional onsite sewage system operator license?

No

Yes If yes, select **one** of the following requirements to qualify for the examination:

1. Hold a valid Virginia Wastewater Works Operator license

Provide your Wastewater Works Operator license number:

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2. Have 6 months of full-time experience* in the operation and maintenance of conventional and alternative onsite sewage systems, **and** completed 10 hours of education (approved by the board) covering the basics of operations and maintenance of conventional onsite sewage systems.

*Required Documentation: Attach a completed **Experience Verification Form** and a transcript or certificate showing successful completion of education requirement.*

3. Have 1 year of full-time experience* in the operation and maintenance of conventional and alternative onsite sewage systems.

*Required Documentation: Attach a completed **Experience Verification Form**.*

* *Experience Verification Form* must be verified by one or more of the following individuals: onsite soil evaluator, a master onsite sewage system operator, a professional engineer, or an authorized onsite soil evaluator certified by VDH before July 1, 2009.

➤ Skip to question 14.

12. Are you applying for a **journeyman alternative** onsite sewage system operator license?

No

Yes If yes, select **one** of the following requirements to qualify for the licensure:

- 1. Have 1 year of full-time experience* assisting with the operation and maintenance of alternative onsite sewage systems, **and** completed 20 hours of education (approved by the board) covering the basics of operations and maintenance of alternative onsite sewage systems.

*Required Documentation: Attach a completed **Experience Verification Form** and a transcript or certificate showing successful completion of education requirement.*

- 2. Have 2 years of full-time experience* assisting with the operation and maintenance of alternative onsite sewage systems.

*Required Documentation: Attach a completed **Experience Verification Form**.*

* **Experience Verification Form** must be verified by one or more of the following individuals: alternative onsite soil evaluator, a master alternative onsite sewage system operator, a professional engineer, or an authorized onsite soil evaluator certified by VDH before July 1, 2009.

➤ Skip to question 14.

13. Are you applying for a **master alternative** onsite sewage system operator license?

No

Yes If yes, select **one** of the following requirements to qualify for the examination:

- 1. Have 1 year of full-time experience* in the operation and maintenance of onsite sewage systems, completed 10 hours of training (approved by the board) covering the basics of operations and maintenance of alternative onsite sewage systems, **and** hold a current or expired conventional onsite sewage system operator license.

*Required Documentation: Attach a completed **Experience Verification Form** and a transcript or certificate showing successful completion of training requirement.*

- 2. Have 1 year of full-time experience* in the operation and maintenance of onsite sewage systems, **and** hold a current or expired conventional onsite sewage system operator license.

*Required Documentation: Attach a completed **Experience Verification Form**.*

- 3. Have 2 years of full-time experience* in the operation and maintenance of onsite sewage systems, **and** completed 20 hours of training (approved by the board) covering the basics of operations and maintenance of alternative onsite sewage systems.

*Required Documentation: Attach a completed **Experience Verification Form** and a transcript or certificate showing successful completion of training requirement.*

- 4. Have 6 months of full-time experience* in the operation and maintenance of onsite sewage systems, **and** hold a valid wastewater works operator license.

Provide your Wastewater Works Operator license number:

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*Required Documentation: Attach a completed **Experience Verification Form**.*

- 5. Hold a wastewater works operator license, **and** completed 20 hours of training (approved by the board) covering the basics of operations and maintenance of alternative onsite sewage systems.

Provide your Wastewater Works license number:

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*Required Documentation: Attach a completed **Experience Verification Form** and a transcript or certificate showing successful completion of training requirement.*

* **Experience Verification Form** must be verified by one or more of the following individuals: alternative onsite soil evaluator, a master alternative onsite sewage system operator, a professional engineer, or an authorized onsite soil evaluator certified by VDH before July 1, 2009.

14. Are you requesting **education and training substitution** to qualify for licensure in accordance with 18VAC160-40-70 of the regulations?
 No
 Yes If yes, complete an *Education & Training Substitution Form*.
15. Have you ever been subject to a **disciplinary action** taken by any (including Virginia) local, state or national regulatory body?
 No
 Yes If yes, complete the [Disciplinary Action Reporting Form](#).
16. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony**? *Any plea of nolo contendere shall be considered a conviction.*
 No
 Yes If yes, complete the [Criminal Conviction Reporting Form](#).
- B. Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **misdemeanor** within the **last three years** from the date of this application? *Any plea of nolo contendere shall be considered a conviction.*
 No
 Yes If yes, complete the [Criminal Conviction Reporting Form](#).
17. By signing this application, I certify the following statements:
- I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
 - I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
 - I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
 - I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
 - I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 40, of the *Code of Virginia* and the *Virginia Board for Waterworks and Wastewater Works Operators and Onsite Sewage System Professionals; Onsite Sewage System Professionals Licensing Regulations*.

Signature _____ Date _____