

This notice is provided pursuant to State Government Article, §10-624, Maryland Code Annotated. The personal information requested on this form is intended to be used in processing you application. Failure to provide the information requested may result in your application not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment ("MDE") is a public agency and is subject to the Maryland Public Information Act. This form may be available on the Internet via MDE's website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State law.

Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 0168 Certification(s) shown 4/1/2024 below will expire on: VERNON MAURICE JENKINS 11445 SHANE CIR The fee to renew these \$50 certifications: RIDGELY MD 21660 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 2 **OPERATOR** WASTEWATER COLLECTION 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
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- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
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- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
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VII. APPLICANT'S STATEMENT

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 0275

Certification(s) shown 4/1/2024

below will expire on: DANNY K. MCCUMBERS 12346 OLD BRIDGE RD The fee to renew these \$50 LOT 201 certifications: OCEAN CITY MD 21842 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER TREATMENT 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 0513 Certification(s) shown 4/1/2024 below will expire on: TIMOTHY RIDDLE 4344 LOUISVILLE RD The fee to renew these \$50 certifications: FINKSBURG MD 21048 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 0551 Certification(s) shown 4/1/2024 below will expire on: DAVID K. BERCH 5660 FRENCH AVE The fee to renew these \$50 certifications: SYKESVILLE MD 21794 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 0591

Certification(s) shown below will expire on:

4/1/2024

DAVID HAMMETT 1202 OAK HILL PLACE APT. The fee to renew these \$50 certifications: ANNAPOLIS MD 21403 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater) (OVER)



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Operator Certification Number: 0763

Class

1

Certification(s) shown below will expire on: 4

4/1/2024

Training Units

Required

24

4754 HOMESDALE AVE The fee

WASTEWATER TREATMENT

Category

The fee to renew these certifications:

\$100

BALTIMORE MD 21206

DORRANCE L. JONES

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I. CERTIFICATES TO RENEW:

Certification Type

TEMPORARY

ILIVIFONANT	WASILWAILK INLAHVILINI		4	24	
OPERATOR	INDUSTRIAL WASTEWATER			16	
OPERATOR	TOR WASTEWATER TREATMENT			30	
OPERATOR	WASTEWATER TREATMENT		Α	16	
TEMPORARY	WATER TREATMENT		2	24	
II. CURRENT EMPLOYMEN	T INFORMATION				
Employer's Name:			Phone #:		
Number of Facilities (or Plants) that	you currently operate:		I am employed	d by the Facility owner	
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Facility / Plant Name		Class PD	WIS (Water)	NPDES (Wastewater)	
-	(OVER)				



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 0825 Certification(s) shown 4/1/2024 below will expire on: **CURTIS WAYNE DEAL** 11619 BIG POOL RD The fee to renew these \$50 certifications: BIG POOL MD 21711 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 3 **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

- This application contains no willful misrepresentations or falsification, and that this information given by me is true and complete to the best of my knowledge and belief
- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 0886 Certification(s) shown 4/1/2024 below will expire on: **DUSTIN MALOTT** 16106 OAK TREE LN The fee to renew these \$50 certifications: WILLIAMSPORT MD 21795 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** INDUSTRIAL WASTEWATER 6 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class

(OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 0914 Certification(s) shown 4/1/2024 below will expire on: RYAN COOK 9843 ROCKY RIDGE RD The fee to renew these \$50 certifications: **ROCKY RIDGE MD 21778** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WASTEWATER COLLECTION 2 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
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- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 0968 Certification(s) shown 4/1/2024 below will expire on: JUAN RIVAS 10301 CHAUTAUOUA AVE The fee to renew these \$50 certifications: LANHAM MD 20706 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10009 Certification(s) shown 4/1/2024 below will expire on: **CASEY E RAUSCH** 102 SOUTH ADAMS ST The fee to renew these \$50 certifications: WOODSBORO MD 21798 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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IV, REQUIREMENTS FOR OPERATORS IN TRAINING

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10238 Certification(s) shown 4/1/2024 below will expire on: CHRISTOPHER HUFFMAN 4334 SYCAMORE DR The fee to renew these \$50 certifications: HAMPSTEAD MD 21074 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category **OPERATOR** INDUSTRIAL WASTEWATER 1 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10314 Certification(s) shown 4/1/2024 below will expire on: ADAM ABE 18406 EAST WILSON RD The fee to renew these \$50 certifications: OLDTOWN MD 21555 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
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IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1039 Certification(s) shown 4/1/2024 below will expire on: BRUCE GILBERT 8793 COTTONGRASS ST The fee to renew these \$50 certifications: WALDORF MD 20603 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10416 Certification(s) shown 4/1/2024 below will expire on: CHRISTOPHER J SWANN 46137 JAMM LANE The fee to renew these \$50 certifications: DRAYDEN MD 20630 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WASTEWATER COLLECTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 10439

Certification(s) shown 4/1/2024 below will expire on: WILLIAM JAMES ZIMMERMAN, JR 12366 LIBERTY EAST The fee to renew these \$50 TERRACE certifications: **UNION BRIDGE MD 21791** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 10457

Certification(s) shown below will expire on: 4/

4/1/2024

GARY ALBRIGHT JR
674 S MAIN ST

The fee to renew these

certifications:

\$100

RED LION PA 17356

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WATER TREATMENT 24 **TEMPORARY** WASTEWATER TREATMENT Α 24 **TEMPORARY** WASTEWATER TREATMENT 5 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10732 Certification(s) shown 4/1/2024 below will expire on: TYLER FORREST 17119 MINER AVENUE The fee to renew these \$50 certifications: WILLIAMSPOR MD 21795 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WASTEWATER COLLECTION 2 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10771 Certification(s) shown 4/1/2024 below will expire on: DANIEL PROCTOR 38817 SLEEPY HOLLOW LANE The fee to renew these \$50 certifications: MEHCNICSVILLE MD 20659 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WATER TREATMENT 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

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Operator in Responsible Charge:

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- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

- This application contains no willful misrepresentations or falsification, and that this information given by me is true and complete to the best of my knowledge and belief
- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 10850

Certification(s) shown

4/1/2024 below will expire on:

The fee to renew these

\$100 certifications:

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

PDWIS (Water) NPDES (Wastewater)

JOSEPH MICHAEL GREEN 16016 FOXVILLE DEERFILED ROAD SABILLASVILLE MD 21784

PERTIFICATED TO BESIEW.

Facility / Plant Name

I. CERTIFICATES TO R		Training Units	
Certification Type	Category	Class	Required
OPERATOR	WASTEWATER COLLECTION	2	16
TEMPORARY	WATER DISTRIBUTION	1	24
II. CURRENT EMPLOYME	NT INFORMATION		
Employer's Name:		Phone #:	
Number of Facilities (or Plants) that you currently operate:		I am employed by the Facility owner	
I am currently not operating any Facility		I provide contractual services to the Facility	

Class

Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed.



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
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- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10898 Certification(s) shown 4/1/2024 below will expire on: LUKE MYERS 2623 MILT SUMMERS ROAD The fee to renew these \$50 certifications: MIDDLETOWN MD 21769 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 3 **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 10945 Certification(s) shown 4/1/2024 below will expire on: FRANK NICK **413 COLES CIRCLE** The fee to renew these \$100 certifications: SALISBURY MD 21804 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER COLLECTION 1 24 **TEMPORARY** WATER DISTRIBUTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11555 Certification(s) shown 4/1/2024 below will expire on: WYATT HANCE 2000 WASH HANCE RD The fee to renew these \$50 certifications: PORT REPUBLIC MD 20676 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WATER TREATMENT 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
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- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
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- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11556 Certification(s) shown 4/1/2024 below will expire on: THOMAS JONES 1070 FLAG HARBOR BLVD The fee to renew these \$50 certifications: ST LEONARD MD 20685 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WATER TREATMENT 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11605 Certification(s) shown 4/1/2024 below will expire on: JOSEPH LETTS 4011 JACINTH WAY The fee to renew these \$50 certifications: NOTTINGHAM MD 21236 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **TEMPORARY** WASTEWATER TREATMENT 45 **TEMPORARY** WASTEWATER TREATMENT 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11606 Certification(s) shown 4/1/2024 below will expire on: RANDY GODLOVE 8120 NECK ROAD The fee to renew these \$50 certifications: WILLIAMSPORT MD 21795 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
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- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

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- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 11622

Certification(s) shown below will expire on: 4/1/2024

certifications:

The fee to renew these

\$50

4585 OWENSVILLE SUDLEY RD

HARWOOD MD 20776

JACOB BJERKNES

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER TREATMENT 24 **TEMPORARY** WASTEWATER TREATMENT 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11623 Certification(s) shown 4/1/2024 below will expire on: DAVID SCOTT 280 V HILLTOP LANE The fee to renew these \$50 certifications: ANNAPOLIS MD 21403 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER COLLECTION 2 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11624 Certification(s) shown 4/1/2024 below will expire on: RUDOLPH L WOODS 4100 ROLLINS AVENUE The fee to renew these \$50 certifications: **BALTIMORE MD 21207** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 2 **TEMPORARY** WASTEWATER COLLECTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11625 Certification(s) shown 4/1/2024 below will expire on: BRIAN GREEN 8608 E MARLBORO RD The fee to renew these \$50 certifications: DELMAR MD 21875 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER TREATMENT 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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1 17 6	if whole of in part, by the public and other goverify your information shown on this application	Č		erar or state law.
i teuse ver	gy your information snown on this application		Operator Certification Number	: 11626
NOMPUMELELO DUBE 2651 S EVERLY DRIVE FREDERICK MD 21701			Certification(s) shown below will expire on	
			The fee to renew these certifications: \$50	
		Failure to complete or submit requirements by the expiration described in Section V.		
I. CERTIFICATES TO R				Training Units
Certification Type	Category		Class	Required
TEMPORARY	WASTEWATER TREATMENT		5A (69
II. CURRENT EMPLOYME	NT INFORMATION			
Employer's Name:			Phone #:	
Number of Facilities (or Plants) th	at you currently operate:		I am employed by the I	Facility owner
I am currently not operating any F	acility]	I provide contractual services t	to the Facility
Please provide the following infor	mation about each Facility/Plant that you oper	rate. Use add	ltional pages as needed.	
Facility / Plant Name		Class	PDWIS (Water) NPDES (Wastewater)
	loren I			
	(OVER)			



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 11627 Certification(s) shown 4/1/2024 below will expire on: RUTLAND M JONES III 1408 BRIARWOOD PLACE The fee to renew these \$50 certifications: **EVERN MD 21144** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

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- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 1168

Certification(s) shown below will expire on: 4

4/1/2024

3514 PORTAL AVE

The fee to renew these

certifications: \$100

TEMPLE HILLS MD 20748

PAUL A. DUMAS

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 7 **SUPERINTENDENT** WASTEWATER TREATMENT Α 5 7 **SUPERINTENDENT** WASTEWATER TREATMENT **OPERATOR** WATER TREATMENT 4 30 5 30 **OPERATOR** WASTEWATER TREATMENT **OPERATOR** WASTEWATER TREATMENT 16 Α II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- No course can be used more than one time for any three-year renewal period.
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- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12000 Certification(s) shown 4/1/2024 below will expire on: PATRICK L HARVEY JR 3 RAVENGLASS ROAD The fee to renew these \$100 certifications: WALDORF MD 20602 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WASTEWATER COLLECTION 24 **TEMPORARY** WATER DISTRIBUTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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IV, REQUIREMENTS FOR OPERATORS IN TRAINING

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12001 Certification(s) shown 4/1/2024 below will expire on: ROBERT RAWLINGS 9509 DONNAN CASTLE CT The fee to renew these \$50 certifications: LAUREL MD 20723 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12002 Certification(s) shown 4/1/2024 below will expire on: TYLER PIPIK 1046 BIRD HILL DRIVE The fee to renew these \$50 certifications: WESTMINSTER MD 21157 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES AN	ND REINSTA	TEMENT

Operator in Responsible Charge:

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Maka ahaaka nayahla ta	Maryland Doord of Wetaryerke	nd Westa Systems Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12003 Certification(s) shown 4/1/2024 below will expire on: STEVE CARR 210 CENTRAL ACE The fee to renew these \$50 certifications: RIGDLEY MD 21660 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER COLLECTION 2 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12004 Certification(s) shown 4/1/2024 below will expire on: WILLIAM HALLETT 225 NICHOLS MANOR DRIVE The fee to renew these \$50 certifications: STEVENSVILLE MD 21666 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER COLLECTION 2 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class

(OVER)



III. CONTINUING EDUCATION:

Page 2

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- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

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- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12005

Certification(s) shown below will expire on: 4/1

4/1/2024

237 OLD SCHOOL HOUSE RD

The fee to renew these

certifications: \$100

FROSTBURG MD 21532

GARRETT I LONG IV

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER TREATMENT 4 45 3 **TEMPORARY** WASTEWATER TREATMENT 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12006

Certification(s) shown 4/1/2024 below will expire on: JONATHAN GLENN JR 702 HOMEWOOD DR The fee to renew these \$50 certifications: POCOMOKE CITY MD 21851 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category **TEMPORARY** WASTEWATER TREATMENT 5A 69 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12008

Certification(s) shown below will expire on: 4/1

4/1/2024

19058 STATE FORREST RD

The fee to renew these

certifications: \$100

GEORGETOWN DE 19947

FRANK DALE MONROE

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER COLLECTION 1 24 **TEMPORARY** WATER DISTRIBUTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)

(OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12009 Certification(s) shown 4/1/2024 below will expire on: **BRADLEY GETRIDGE** 5959 SHEPHERDSTOWN PIKE The fee to renew these \$50 certifications: SHANOADAH JUNCT MD 25442 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER TREATMENT 5A 69 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class

(OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12010 Certification(s) shown 4/1/2024 below will expire on: EDWIN MONGE 103 FIELDSTONE COURT The fee to renew these \$50 certifications: FREDERICK MD 21702 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER TREATMENT 5A 69 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12011 Certification(s) shown 4/1/2024 below will expire on: MATTTHEW DUNN 12041 MAYFAIR AVENUE The fee to renew these \$50 certifications: **HAGERSTOWN MD 21742** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER TREATMENT 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

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- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12012 Certification(s) shown 4/1/2024 below will expire on: **BRANDON WARD** 102 W EAST STREET The fee to renew these \$50 certifications: DELMAR MD 21875 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER TREATMENT 5A 69 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
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IV, REQUIREMENTS FOR OPERATORS IN TRAINING

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12015 Certification(s) shown 4/1/2024 below will expire on: MEGAN HILLEGAS 224 11TH AVENUE The fee to renew these \$100 certifications: MYERESDALE PA 15552 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER TREATMENT 4 45 3 **TEMPORARY** WASTEWATER TREATMENT 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)

(OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12017

Certification(s) shown below will expire on: 4/1/2024

certifications:

The fee to renew these

\$100

BRANDON DILLON 1020 STONE RD

WESTMINSTER MD 21158

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WASTEWATER COLLECTION 24 **TEMPORARY** WATER DISTRIBUTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)

(OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12018

Certification(s) shown below will expire on: 4/

4/1/2024

Training Units

GARY L CHALK 24 E GEORGE STREET

The fee to renew these

\$100

24 E GEURGE STREET

I. CERTIFICATES TO RENEW:

certifications:

WESTMINSTER MD 21157

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

Certification Type Class Required Category 2 **TEMPORARY** WASTEWATER COLLECTION 24 **TEMPORARY** WATER DISTRIBUTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)

(OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12019 Certification(s) shown 4/1/2024 below will expire on: DAVID BRIAN BARKER 621 FERNHILL RD The fee to renew these \$50 certifications: ORCORD BEACH MD 21226 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 7 **TEMPORARY** INDUSTRIAL WASTEWATER 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12020 Certification(s) shown 4/1/2024 below will expire on: FRANCIS FIHAN 1803 SAUNDERS WAY The fee to renew these \$50 certifications: **GLEN BURNIE MD 21061** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12021 Certification(s) shown 4/1/2024 below will expire on: STEFAN MCPHERSON 14109 SPRING BRANCH DRIVE The fee to renew these \$50 certifications: UPPER MARLBORO MD 20772 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class

(OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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IV, REQUIREMENTS FOR OPERATORS IN TRAINING

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- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
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VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

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- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12022 Certification(s) shown 4/1/2024 below will expire on: ERVIN BRIDDELL 6485 FREEDOM DR The fee to renew these \$50 certifications: **GLEN BURNIE MD 21061** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12023 Certification(s) shown 4/1/2024 below will expire on: JOJUAN GASQUE 3731 W GARRISON AVE The fee to renew these \$50 certifications: **BALTIMORE MD 21215** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12024

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these certifications: \$100

Failure to complete or submit renewal

FORT ASHBY WV 26719

DUSTIN RICHARDS 459 FORT ASHBY

I. CERTIFICATES TO RENEW:

requirements by the expiration date will result in an additional late fees as described in Section V.

Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 **TEMPORARY** WASTEWATER TREATMENT 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12025

Certification(s) shown below will expire on:

4/1/2024

WILLIAM M DAVIS
709 UNIVERSITY DRIVE

The fee to renew these

certifications:

\$100

WALDORF MD 20602

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER TREATMENT 1 24 **TEMPORARY** WATER TREATMENT 5RO 24 **TEMPORARY** WASTEWATER TREATMENT 69 5A II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12026

Certification(s) shown below will expire on:

4/1/2024

MILTON MATTHEW LONG 7024 HUNTER LN

The fee to renew these

certifications:

PDWIS (Water) NPDES (Wastewater)

\$100

HYATTSVILLE MD 20782

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

PERTIFICATED TO DESIGNA

Facility / Plant Name

I. CERTIFICATES TO R	KENEW:		Training Units		
Certification Type	Category	Class	Required		
TEMPORARY	WASTEWATER COLLECTION	2	24		
TEMPORARY	WATER DISTRIBUTION	1	24		
II. CURRENT EMPLOYMENT INFORMATION					
Employer's Name:		Phone #:			
Number of Facilities (or Plants) that you currently operate:		I am employed by	the Facility owner		
I am currently not operating any Facility		I provide contractual services to the Facility			

Class

Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed.



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12027

Certification(s) shown

certifications:

4/1/2024 below will expire on:

The fee to renew these

\$100

UPPER MARLBORO MD 20772

HAYWOOD 4TH ROBINSON 13009 VAN BRADY RD

> Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 **TEMPORARY** WASTEWATER COLLECTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

- This application contains no willful misrepresentations or falsification, and that this information given by me is true and complete to the best of my knowledge and belief
- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 12028

Certification(s) shown 4/1/2024 below will expire on: MOHAMMED ALMAFRACHI **5025 FILLMORE AVE** The fee to renew these \$50 **APT 200** certifications: **ALEXANDRIA VA 22311** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER TREATMENT 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12042 Certification(s) shown 4/1/2024 below will expire on: MATTHEW CORNELIA 610 SHORE DRIVE The fee to renew these \$100 certifications: JOPPA MD 21085 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 **TEMPORARY** WASTEWATER COLLECTION 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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J 1 1. C	in whole of in part, by the public and other gove	0		•	ii oi State law.
Please v	erify your information shown on this application	-	corrections as neeaea perator Certifcation Nu		12043
MARC MCCLOU	JD	O _F	Certification(s) s below will expi	hown	4/1/2024
9400 7TH STREET LAUREL MD 20723		The fee to renew these certifications: \$50			\$50
		Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.			
I. CERTIFICATES TO			Class		aining Units
Certification Type	Category		Class		equired
TEMPORARY	INDUSTRIAL WASTEWATER		1	0	
II. CURRENT EMPLOYM	ENT INFORMATION				
Employer's Name:			Phone #:		
Number of Facilities (or Plants)	that you currently operate:	I am employed by the Facility owner			
I am currently not operating any	Facility	I p	rovide contractual serv	vices to	the Facility
Please provide the following info	ormation about each Facility/Plant that you open	rate. Use addtio	onal pages as needed.		_
Facility / Plant Name		Class I	PDWIS (Water) NPI	DES (W	'astewater)
	(OVER)				
	(OVER)				



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 12059 Certification(s) shown 4/1/2024 below will expire on: JASON FLORY 1256 EMERSSON STREET NE The fee to renew these \$50 certifications: **WASHINGTON DC 20017** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER COLLECTION 2 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1217 Certification(s) shown 4/1/2024 below will expire on: ALPHONZA CHASE 14645 GALLANT LANE The fee to renew these \$50 certifications: WALDORF MD 20601 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1239 Certification(s) shown 4/1/2024 below will expire on: JOHN C. GANNON, JR. 1211 IOHN BROWN RD The fee to renew these \$50 certifications: **OUEENSTOWN MD 21658** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER TREATMENT 5AS 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



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- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
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- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
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- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

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- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 1404

Certification(s) shown below will expire on: 4

I provide contractual services to the Facility

PDWIS (Water) NPDES (Wastewater)

4/1/2024

CARLTON WHEELER 8521 RAYMORT DRIVE

The fee to renew these

\$50

NOTTINGHAM MD 21236

certifications:

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW:

I am currently not operating any Facility

Facility / Plant Name

I. CERTIFICATES TO RENEW:			Training Units
Certification Type	Category	Class	Required
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WASTEWATER TREATMENT	А	16
II. CURRENT EMPLOYMI	ENT INFORMATION		
Employer's Name:		Phone #:	
Number of Facilities (or Plants) that you currently operate:		I am employed by	the Facility owner
	<u> </u>		

Class

Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed.



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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 Name and Certification Number of

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Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 1413

Certification(s) shown below will expire on:

4/1/2024

JOSHUA GLIPTIS

5173 DOWNWEST RIDE

The fee to renew these

certifications:

\$100

COLUMBIA MD 21044

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW:

I. CERTIFICATES TO RENEW:			Training Units	
Certification Type	Category	Class	Required	
OPERATOR	WASTEWATER COLLECTION	2	16	
OPERATOR	WATER DISTRIBUTION	1	16	
II. CURRENT EMPLOYM	ENT INFORMATION			
Employer's Name:		Phone #:		
Number of Facilities (or Plants) that you currently operate:		I am employed by	the Facility owner	
				

Number of Facilities (or Plants) that you currently operate:	I am employed by the Facility owner			_
I am currently not operating any Facility	I provide contractual services to the Facility			Ξ
Please provide the following information about each Facility/Plant that you operate.	Use add	dtional pages as ne	eded.	
Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)	
				_
(OVER)				



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



DALONTE M. HARRISON

APPLICATION FOR CERTIFICATION RENEWAL MARYLAND BOARD OF WATERWORKS AND WASTE SYSTEMS OPERATORS

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 1440

Certification(s) shown

below will expire on:

4/1/2024

The fee to renew these

7200 IAYWICK AVE \$50 **APT 824** certifications: FORT WASHINGTON MD 20744 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WASTEWATER COLLECTION 2 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1500 Certification(s) shown 4/1/2024 below will expire on: **BRANDON BENSON** 111862 RIDGE ROAD The fee to renew these \$50 certifications: **GREEN CASTLE PA 17225** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1509 Certification(s) shown 4/1/2024 below will expire on: GEOFFREY V. GALLION 905 N. MAIN ST. The fee to renew these \$50 certifications: MT AIRY MD 21771 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WASTEWATER COLLECTION 2 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

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Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 1522

Certification(s) shown below will expire on:

4/1/2024

SCOTT LEE

The fee to renew these

\$100

12956 HURON DR

certifications:

LUSBY MD 20657

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **TEMPORARY** WATER TREATMENT 24 5 **TEMPORARY** WASTEWATER TREATMENT 45 **TEMPORARY** WASTEWATER TREATMENT Α 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

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- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1687 Certification(s) shown 4/1/2024 below will expire on: PHILIP FONTENELLE 29 N FAWN DR The fee to renew these \$50 certifications: NEWARK DE 19711 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **OPERATOR** WATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
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- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
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Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka nayahla ta	Maryland Doord of Wetaryerke	nd Westa Systams Operators	

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Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1760 Certification(s) shown 4/1/2024 below will expire on: JAMES J. KONDRACKI 91 MOUNTAIN RD The fee to renew these \$50 certifications: RISING SUN MD 21911 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 2 **TEMPORARY** INDUSTRIAL WASTEWATER II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
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V. LATE	FEES A	ND REINSTA	ATEMENT

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka nayahla ta	Maryland Doord of Wetaryerke	nd Westa Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1778 Certification(s) shown 4/1/2024 below will expire on: DAVID WILSON 8198 - R3 WATERFORD RD The fee to renew these \$50 certifications: PADADENA MD 21122 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WATER DISTRIBUTION 1 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of
 Operator in Responsible Charge:

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V. LATE	FEES	AND	REINST	TATEMENT

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by	email in lieu of mail.		
Make checks payable to: Maryla	and Roard of Waterworks	and Waste Systems Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 1906 Certification(s) shown 4/1/2024 below will expire on: RODNEY C. KUHNS 7686 SIMPSON RD The fee to renew these \$50 certifications: GLEN ROCK PA 17327 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 3 **OPERATOR** WASTEWATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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IV, REQUIREMENTS FOR OPERATORS IN TRAINING

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- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 2138 Certification(s) shown 4/1/2024 below will expire on: TOD E SCHENCK 316 NOTTINGHAM RD #B The fee to renew these \$50 certifications: ELKTON MD 21921 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 2 **TEMPORARY** INDUSTRIAL WASTEWATER II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class

(OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 2355 Certification(s) shown 4/1/2024 below will expire on: JEDIDIAH BITANGO 15 BLUE RIDGE AVE The fee to renew these \$50 certifications: THURMONT MD 21788 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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1 100	in whole or in part, by the public and other g	<u> </u>		eral or State law.
Please ve	rify your information shown on this applicat	tion and make a	y corrections as needed.	
			Operator Certification Number	r: 2361
MARIO BENITEZ 1712 GRUENTHER AVE. ROCKVILLE MD 20851			Certification(s) shown below will expire on	
			The fee to renew these certifications	X 5 ()
		Failure to complete or submit re requirements by the expiration d result in an additional late fee described in Section V.		
I. CERTIFICATES TO F				Training Units
Certification Type	Category		Class	Required
OPERATOR	WATER DISTRIBUTION		1	16
II. CURRENT EMPLOYME	ENT INFORMATION			
Employer's Name:			Phone #:	
Number of Facilities (or Plants) the	nat you currently operate:		I am employed by the	Facility owner
I am currently not operating any I	Facility	I	provide contractual services	to the Facility
Please provide the following info	rmation about each Facility/Plant that you c	perate. Use ada	ltional pages as needed.	
Facility / Plant Name		Class	PDWIS (Water) NPDES ((Wastewater)
	(OVER)			



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
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- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 2428

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these certifications: \$50

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

Training Units Required

LEE ROY GARRETT, JR. 1340 LOG INN RAD

ANNAPOLIS MD 21409

I. CERTIFICATES TO RENEW:

Certification Type	Category		Class	Training Units Required	
OPERATOR	WASTEWATER TREATMEN	Т	5	30	
OPERATOR	WASTEWATER TREATMEN	Т	Α	16	
II. CURRENT EMPLOYM	ENT INFORMATION				
Employer's Name:			Phone #:		
Number of Facilities (or Plants) t	hat you currently operate:		I am employed b	y the Facility owner	
I am currently not operating any Facility		I provi	I provide contractual services to the Facility		
Please provide the following info	ormation about each Facility/Plant that yo	ou operate. Use addtiona	l pages as needed.		
Facility / Plant Name		Class PDV	VIS (Water) NP	DES (Wastewater)	

(OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 2429

Certification(s) shown below will expire on:

4/1/2024

DEREK C. TALIAFERRO 1629 HAVRE DE GRACE DR.

The fee to renew these

certifications:

\$50

EDGEWATER MD 21037

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Category Class Required OPERATOR WASTEWATER TREATMENT 5 30 OPERATOR WASTEWATER TREATMENT A 16

II. CURRENT EMPLOYMENT INFORMATION	
Employer's Name:	Phone #:
Number of Facilities (or Plants) that you currently operate:	I am employed by the Facility owner
I am currently not operating any Facility	I provide contractual services to the Facility
Please provide the following information about each Facility/Plant that you op	erate. Use addtional pages as needed.
Facility / Plant Name	Class PDWIS (Water) NPDES (Wastewater)
(OVER)	



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 2447

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these

certifications: \$50

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as

described in Section V.

7974 NOLCREST RD
GLEN BURNIE MD 21061

I. CERTIFICATES TO RENEW:

ROBERT STULL

Jnits

II. CURRENT EMPLOYMENT INFORMATION			
Employer's Name:	Phone #:		
Number of Facilities (or Plants) that you currently operate:	I am employed by the Facility owner		
I am currently not operating any Facility	I provide contractual services to the Facility		
Please provide the following information about each Facility/Plant that	you operate. Use addtional pages as needed.		
Facility / Plant Name	Class PDWIS (Water) NPDES (Wastewater)		
(OVE	R)		



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 2456

Certification(s) shown below will expire on:

I provide contractual services to the Facility

PDWIS (Water) NPDES (Wastewater)

4/1/2024

RYAN E. BAER 13114 RITCHIE RD

The fee to renew these

\$100 certifications:

SMITHSBURG MD 21783

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW:

I am currently not operating any Facility

Facility / Plant Name

I. CERTIFICATES TO F	Training Units			
Certification Type	Category	Class	Required	
OPERATOR	WATER TREATMENT	2	16	
OPERATOR	WASTEWATER TREATMENT	4	30	
OPERATOR	WASTEWATER TREATMENT	5	30	
OPERATOR	WASTEWATER TREATMENT	А	16	
II. CURRENT EMPLOYMENT INFORMATION				
Employer's Name:		Phone #:		
Number of Facilities (or Plants) th	nat you currently operate:	I am employed by	the Facility owner	

Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed.

(OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 2534

Certification(s) shown below will expire on: 4

I provide contractual services to the Facility

PDWIS (Water) NPDES (Wastewater)

certifications:

4/1/2024

KEVIN KAZMIERSKI 101 JACKPINE DR

The fee to renew these

\$100

PASADENA MD 21122

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW:

I am currently not operating any Facility

Facility / Plant Name

I. CENTIFICATES TO		Training Units	
Certification Type	Category	Class	Required
OPERATOR	WATER DISTRIBUTION	1	16
OPERATOR	WASTEWATER COLLECTION	2	16
II. CURRENT EMPLOYM	ENT INFORMATION		
Employer's Name:		Phone #:	
Number of Facilities (or Plants) that you currently operate:		I am employed by	the Facility owner
	<u> </u>		

Class

Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed.

(OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 2734 Certification(s) shown 4/1/2024 below will expire on: LESLIE L. GUESSFORD 17425 LEXINGTON AVE The fee to renew these \$50 certifications: **HAGERSTOWN MD 21740** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER COLLECTION 2 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
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- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
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- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 2788 Certification(s) shown 4/1/2024 below will expire on: DANIELLE PHELPS 3870 BAYSIDE RD The fee to renew these \$50 certifications: CHESAPEAKE BCH MD 20732 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER TREATMENT 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class

(OVER)



III. CONTINUING EDUCATION:

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 2955

Certification(s) shown below will expire on: 4/1/2024

certifications:

The fee to renew these

\$50

Training Units

Required

JOSEPH G. BARKER, JR. 7744 SWAN LN

OWINGS MD 20736

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Certification Type Category Class

 OPERATOR
 WASTEWATER TREATMENT
 5
 30

 OPERATOR
 WASTEWATER TREATMENT
 A
 16

II. CURRENT EMPLOYMENT INFORMATION

II. CURRENT EMPLOTMENT INFORMATION		
Employer's Name:	Phone #:	
Number of Facilities (or Plants) that you currently operate:	I am employed by the Facility owner	
I am currently not operating any Facility	I provide contractual services to the Facility	
Please provide the following information about each Facility/Plant that you operate	e. Use addtional pages as needed.	
Facility / Plant Name	Class PDWIS (Water) NPDES (Wastewater)	
(OVER)		



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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subject to inspection or copying, i	n whole or in part, by the public and other gove	ernmental age	encies, if not protected by fede	eral or State law.
Please ver	rify your information shown on this application	and make a	ny corrections as needed.	
			Operator Certification Number	: 3028
CHARLES A NAR	CROSS		Certification(s) shown below will expire on	
314 KINGSTON (\$50	
SYKESVILLE MD			Failure to complete or requirements by the ex result in an addition described in S	piration date will nal late fees as
I. CERTIFICATES TO R				Training Units
Certification Type	Category		Class	Required
OPERATOR	INDUSTRIAL WASTEWATER		1	0
II. CURRENT EMPLOYME	ENT INFORMATION			
Employer's Name:			Phone #:	
Number of Facilities (or Plants) th	at you currently operate:		I am employed by the I	Facility owner
I am currently not operating any F	acility	1	provide contractual services	to the Facility
Please provide the following infor	mation about each Facility/Plant that you open	rate. Use ada	ltional pages as needed.	
Facility / Plant Name		Class	PDWIS (Water) NPDES (Wastewater)
	(OVED)			
	(OVER)			



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 3048

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these

certifications: \$50

LEONARDTOWN MD 20650

KYLE SHEPHERD 23284 JENIFER COURT

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)

(OVER)



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Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 3118 Certification(s) shown 4/1/2024 below will expire on: EVERETT H KENNEDY III 2212 BARCLAY RD The fee to renew these \$50 certifications: BARCLAY MD 21607 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class

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Operator Certification Number: 3204

Certification(s) shown below will expire on:

4/1/2024

1710 LANDMARK DRIVE The fee to renew these

certifications:

\$100

APTA A FOREST HILL MD 21050

JONATHAN D ELY

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

CEDTIFICATES TO DESIGNA

) RENEW:		Training Units
Category	Class	Required
WATER TREATMENT	4	7
WASTEWATER TREATMENT	5	7
WATER TREATMENT	3	7
WATER TREATMENT	2	7
WATER TREATMENT	4	30
WASTEWATER TREATMENT	А	7
MENT INFORMATION		
	Phone #:	
s) that you currently operate:	I am employed by	the Facility owner
	Category WATER TREATMENT WASTEWATER TREATMENT WATER TREATMENT WATER TREATMENT WATER TREATMENT	WATER TREATMENT 4 WASTEWATER TREATMENT 5 WATER TREATMENT 3 WATER TREATMENT 2 WATER TREATMENT 4 WASTEWATER TREATMENT A MENT INFORMATION Phone #:

Employer's rune.	Thone ".	
Number of Facilities (or Plants) that you currently operate:	I am employed by the Facility owner	
I am currently not operating any Facility	I provide contractual services to the Facility	
Please provide the following information about each Facility/Plant that y	ou operate. Use addtional pages as needed.	
Facility / Plant Name	Class PDWIS (Water) NPDES (Wastewater)	
(OVER		



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

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I hereby affirm that I understand all information provided on this application. I also certify the following:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 3554 Certification(s) shown 4/1/2024 below will expire on: JONATHON BRENDEL 206 SUNSET DRIVE The fee to renew these \$50 certifications: **GLEN BURNIE MD 21060** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WASTEWATER COLLECTION 2 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 3573 Certification(s) shown 4/1/2024 below will expire on: RUSSELL F FADER 530 W POTOMAC ST The fee to renew these \$50 certifications: **BRUNSWICK MD 21716** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 3696

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these

certifications: \$100

14625 ROTHGEB DRIVE ROCKVILLE MD 20850

WAYNE BUTLER

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **OPERATOR** WASTEWATER COLLECTION 16 **OPERATOR** WATER DISTRIBUTION 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 3699 Certification(s) shown 4/1/2024 below will expire on: BRADLEY W. UTTERBACK 3731- B POINT OF ROCKS RD The fee to renew these \$50 certifications: JEFFERSON MD 21755 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 7 **SUPERINTENDENT** WATER TREATMENT II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



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Page 2

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 3730

Certification(s) shown below will expire on: 4/1/

4/1/2024

The fee to renew these

certifications: \$50

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as

described in Section V.

ALLEN L HERMANN, JR.
10 WHITE SAIL CIR

I. CERTIFICATES TO RENEW:

BERLIN MD 21811

I. CERTIFICATES TO REILEW		Training Units	
Certification Type	Category	Class	Required
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WASTEWATER TREATMENT	Α	16
	0.000		

II. CURRENT EMPLOYMENT INFORMATION	
Employer's Name:	Phone #:
Number of Facilities (or Plants) that you currently operate:	I am employed by the Facility owner
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III. CONTINUING EDUCATION:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 3921 Certification(s) shown 4/1/2024 below will expire on: RICHARD FOARD 2625 PUTNAM RD The fee to renew these \$50 certifications: FOREST HILL MD 21050 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 7 **OPERATOR** WATER TREATMENT G II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
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- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
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IV, REQUIREMENTS FOR OPERATORS IN TRAINING

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- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
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- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 4069 Certification(s) shown 4/1/2024 below will expire on: GREG SOMMER 25921 WOODFIELD RD The fee to renew these \$50 certifications: DAMASCUS MD 20872 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 4073 Certification(s) shown 4/1/2024 below will expire on: LINDSEY BAKER 12617 SEAVOLT RD The fee to renew these \$50 certifications: HANCOCK MD 21750 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 3 **TEMPORARY** WASTEWATER TREATMENT 45 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 4226 Certification(s) shown 4/1/2024 below will expire on: SADE DUNNOCK 1613 LOCHWOOD RD The fee to renew these \$50 certifications: BALTIMORE MD 21218 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

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Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 4236

Certification(s) shown

below will expire on:

The fee to renew these certifications:

\$100

ANDREW MCGUIGAN 365 RESERVIOR RD

PERRYVILLE MD 21903

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **OPERATOR** WATER TREATMENT 16 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT Α 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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RAYFORD F MCEACHERN, JR.

7520 FAIRWIND DR

APPLICATION FOR CERTIFICATION RENEWAL MARYLAND BOARD OF WATERWORKS AND WASTE SYSTEMS OPERATORS

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 4457

Certification(s) shown 4/1/2024

below will expire on:

\$50

The fee to renew these

certifications: \$50

BALTIMORE MD 21244

Failure to complete (

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 4750 Certification(s) shown 4/1/2024 below will expire on: JOHN JOSEPH THOMPSON III 23213 COLTON POINT RD The fee to renew these \$50 certifications: **AVENUE MD 20609** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category **OPERATOR** WASTEWATER COLLECTION 2 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



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- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

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I hereby affirm that I understand all information provided on this application. I also certify the following:

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- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 5031 Certification(s) shown 4/1/2024 below will expire on: MAURICE E. SCOTT, JR. 107 10TH AVENUE The fee to renew these \$50 certifications: **BROOKLYN PARK MD 21225** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 5150

Certification(s) shown below will expire on: 4/1/2024

certifications:

The fee to renew these

\$100

LOUIS C. PROCTOR, JR. 4290 KAYAK DR

BRANDYWINE MD 20613

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 2 **OPERATOR** WASTEWATER COLLECTION 16 **OPERATOR** WATER DISTRIBUTION 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 5156 Certification(s) shown 4/1/2024 below will expire on: RODNEY RICHARDSON, SR. 15 N. CURLEY STREET The fee to renew these \$50 certifications: **BALTIMORE MD 21224** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WASTEWATER COLLECTION 2 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

- The number of training units required to renew are based on type of certification and indicated in Section I of this application.
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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 5368

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these

certifications: \$50

WESTMINSTER MD 21158

KARL E. WAREHIME 1107 STONE RD

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 6263 Certification(s) shown 4/1/2024 below will expire on: ROBERT F HUTSON 4828 HYDES RD The fee to renew these \$50 certifications: **HYDES MD 21082** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 2 **OPERATOR** INDUSTRIAL WASTEWATER II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 6400 Certification(s) shown 4/1/2024 below will expire on: DAVID M DEMILIO 1798 LIBERTY GROVE RD The fee to renew these \$50 certifications: COLORA MD 21917 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 2 **TEMPORARY** INDUSTRIAL WASTEWATER II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

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		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
- Beyond 90 days, fully certified Operator certifications enter a reinstatement period for the two year period beyond the initial expiration date. The reinstatement fee is \$150 and is additional to the renewal fee.
- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

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- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 6615 Certification(s) shown 4/1/2024 below will expire on: MIKEL R ZECHMAN 1507 OLD MANCHESTER RD The fee to renew these \$50 certifications: WESTMINSTER MD 21157 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 7 **SUPERINTENDENT** WATER DISTRIBUTION 1 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
- Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
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Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka nayahla ta	Maryland Doord of Wetaryerke	nd Westa Systams Operators	

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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 6862 Certification(s) shown 4/1/2024 below will expire on: RICKEY R BELL 2724 BERYL AVENUE The fee to renew these \$50 certifications: **BALTIMORE MD 21205** Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 6874

Certification(s) shown below will expire on: 4/1/2024

certifications:

The fee to renew these

\$50

DAVID L. HUTCHINSON 38472 ARLINGTON DR

MECHANICSVILLE MD 20659

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 6878

Certification(s) shown

certifications:

4/1/2024 below will expire on:

The fee to renew these

\$50

LAUREL MD 20707

TROY E. QUEEN 15505 PARK HALL CT

> Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 7261

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these

\$50

certifications:

ESSEX MD 21221

82 BERKSHIRE RD

CHRISTOPHER T. KROEN

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I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 7346

Certification(s) shown below will expire on:

4/1/2024

P.O. BOX 476 The fee to renew these

certifications: \$100

LUSBY MD 20657

GEORGE O. HANSON

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WATER TREATMENT 16 2 **SUPERINTENDENT** WATER TREATMENT 7 **SUPERINTENDENT** 1 7 WATER TREATMENT II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 7555 Certification(s) shown 4/1/2024 below will expire on: **BRIAN WAYNE COE** 1118 FRENCHTOWN RD The fee to renew these \$50 certifications: PERRYVILLE MD 21903 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **TEMPORARY** WASTEWATER TREATMENT 4 24 **TEMPORARY** WASTEWATER TREATMENT 24 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: I am employed by the Facility owner Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility I am currently not operating any Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name Class PDWIS (Water) NPDES (Wastewater)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
- Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application. Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
- Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
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- Training requirements for Superintendents are in addition to Operator training requirements and cannot be duplicated.
- No course can be used more than one time for any three-year renewal period.
- All training must be approved by the WWSO Board. The inventory of approved training and additional information related to continuing education can be found on the Board's website.
- Training requirements for renewal are outlined in COMAR 26.06.01.16 (Table 8).
- Multiple renewal dates can be consolidated if all requirements are met. Requests must be in writing or by email.

IV, REQUIREMENTS FOR OPERATORS IN TRAINING

- Operators In Training are required to attempt the exam for each certification to be renewed within the three-year period leading up the certification expiration date. Passing the exam is not required for renewal.
- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

		· ·	
V. LATE	FEES A	ND REINSTA	ATEMENT

Operator in Responsible Charge:

- Failure to complete or submit all renewal requirements by the expiration date will result in a late fee of \$100 in addition to the renewal fee.
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- Any Operator certificate not renewed after the two-year reinstatement period is considered permanently expired. The unlicensed operator must reapply for OIT certification and complete all OIT requirements, including passing the appropriate exam again.
- There is no reinstatement period for Operators-In-Training (OIT), Grandfather or Superintendent certifications. These remain in the late renewal period and do not permanently expire.

VII. APPLICANT'S STATEMENT

I hereby affirm that I understand all information provided on this application. I also certify the following:

- This application contains no willful misrepresentations or falsification, and that this information given by me is true and complete to the best of my knowledge and belief
- I am aware that should an investigation at any time disclose my misrepresentation or falsification, my application will be disapproved or my certification will be suspended or revoked.
- I agree the Training Sponsors as indicated by my training documentation may release my name, proof of attendance and grade, as applicable, to the Maryland Department of the Environment to verify my proof of training.

Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 7742 Certification(s) shown 4/1/2024 below will expire on: DIANE L BAUER 51 FAIRVIEW ROAD The fee to renew these \$50 certifications: ELKTON MD 21921 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category **OPERATOR** WATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 7891 Certification(s) shown 4/1/2024 below will expire on: DANIEL R. SHIELDS 105 WINDWARD CT The fee to renew these \$50 certifications: STEVENSVILLE MD 21666 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 3 **OPERATOR** WASTEWATER TREATMENT 30 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

Page 2

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- Operators In Training must work under the direction of an Operator in Responsible Charge.
 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 8582

Certification(s) shown 4/1/2024 below will expire on:

The fee to renew these

\$50 certifications:

Training Units

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

AARON D. MILES 215 FALLEN HORSE CIRCLE APARTMENT 103 **QUEENSTOWN MD 21658**

<u>l. CERT</u>	<u>IFICATES</u>	TO RENEW:
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Certification Type	Category		Class	Required
OPERATOR	WASTEWATER COLLECTION		2	16
II. CURRENT EMPLOYMENT	Γ INFORMATION			
Employer's Name:			Phone	#:
Number of Facilities (or Plants) that	you currently operate:	I an	n employ	red by the Facility owner
I am currently not operating any Faci	lity	I provide c	ontractua	al services to the Facility
Please provide the following informa	ation about each Facility/Plant that you opera	te. Use addtional pag	es as nee	eded.
Facility / Plant Name		Class PDWIS	(Water)	NPDES (Wastewater)
	(OVER)	_		



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Applicant's Signature		Date	
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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 8892 Certification(s) shown 4/1/2024 below will expire on: THEODORE R. GEPPERT 10983-E GUILFORD RD The fee to renew these \$50 certifications: ANNAPOLIS JUNCT MD 20701 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category 3 7 **SUPERINTENDENT** WATER TREATMENT II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



III. CONTINUING EDUCATION:

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 9075

Certification(s) shown below will expire on:

4/1/2024

3400 EVANS RD The fee to renew these

certifications:

\$100

HUNTINGTOWN MD 20639

JOHN E. TURNER

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 7 **SUPERINTENDENT** WASTEWATER TREATMENT Α **OPERATOR** WASTEWATER TREATMENT Α 16 3 **OPERATOR** WATER TREATMENT 30 **OPERATOR** WATER TREATMENT 2 16 1 **OPERATOR** 16 WATER TREATMENT 5 7 **SUPERINTENDENT** WASTEWATER TREATMENT II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name PDWIS (Water) NPDES (Wastewater) Class



III. CONTINUING EDUCATION:

Page 2

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 9333

Certification(s) shown below will expire on:

certifications:

4/1/2024

The fee to renew these

\$100

STEVEN R. SACCONE, JR. 11118 KATIE LN

WAYNESBORO PA 17268

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I. CERTIFICATES TO RENEW: Training Units Certification Type Class Required Category 5 **OPERATOR** WASTEWATER TREATMENT 30 **OPERATOR** WASTEWATER TREATMENT Α 16 **TEMPORARY** 2 24 WATER TREATMENT II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. Facility / Plant Name PDWIS (Water) NPDES (Wastewater) (OVER)



III. CONTINUING EDUCATION:

Page 2

To qualify for certification renewal, all applicants must demonstrate satisfactory completion of relevant continuing education.

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- Upon passing the exam and obtainment of full certification, the training requirement is reduced by one-third.
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 Name and Certification Number of

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V. LATE	FEES A	ND REINSTA	ATEMENT

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Applicant's Signature		Date	
Last 4 digits of Social Security Number	Email Address		
I consent to recieve my certificate(s) by email in lieu of mail.		
Maka ahaaka payahla to: M	Maryland Doord of Waterworks a	and Wasta Systams Operators	

Make checks payable to: Maryland Board of Waterworks and Waste Systems Operators
Mail to: Maryland Department of the Environment, P.O. Box 2057, Baltimore, Maryland 21203-1708



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 9594

Certification(s) shown below will expire on: 4/1

I provide contractual services to the Facility

PDWIS (Water) NPDES (Wastewater)

4/1/2024

The fee to renew these

certifications: \$100

BEL AIR MD 21014

GREGG FREDERICK BATES 1028 ALEXANDRIA WAY

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I. CERTIFICATES TO RENEW:

I am currently not operating any Facility

Facility / Plant Name

I. CERTIFICATES TO RENEW:			Training Units	
Certification Type	Category	Class	Required	
OPERATOR	WATER TREATMENT	4	30	
SUPERINTENDENT	WATER TREATMENT	4	7	
II. CURRENT EMPLOYME	NT INFORMATION			
Employer's Name:		Phone #:		
Number of Facilities (or Plants) that you currently operate:		I am employed by t	the Facility owner	

Class

Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed.



III. CONTINUING EDUCATION:

Page 2

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 Name and Certification Number of

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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 9775

Certification(s) shown below will expire on: 4/1/2024

The fee to renew these

certifications: \$100

5943 CHARLES ST BALTIMORE MD 21207

HAHNS S. HAIRSTON

Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V.

I CERTIFICATES TO RENEW:

I. CERTIFICATES TO F	Training Units		
Certification Type	Category	Class	Required
OPERATOR	WATER TREATMENT	4	30
SUPERINTENDENT	WATER TREATMENT	4	7
II. CURRENT EMPLOYME	ENT INFORMATION		

II. CORREST EMI LOTMENT INFORMATION		
Employer's Name:	Phone #:	
Number of Facilities (or Plants) that you currently operate:	I am employed by the Facility owner	_
I am currently not operating any Facility	I provide contractual services to the Facility	
Please provide the following information about each Facility/Plant that you operate	rate. Use addtional pages as needed.	
Facility / Plant Name	Class PDWIS (Water) NPDES (Wastewater)	
(OVER)		



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Please verify your information shown on this application and make any corrections as needed.

Operator Certification Number: 9944

Certification(s) shown below will expire on:

certifications:

4/1/2024

MATTHEW CARR

1195 BRADSHAW ROAD

The fee to renew these

\$100

WARFORDSBURG PA 17267

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I. CERTIFICATES TO RENEW:

I. CERTIFICATES TO RENEW.			Training Units
Certification Type	Category	Class	Required
OPERATOR	WATER TREATMENT	4	30
SUPERINTENDENT	WATER TREATMENT	4	7
II. CURRENT EMPLOYMI	ENT INFORMATION		
Employer's Name:		Phone #:	
Namelan of Familities (an Dlanta) to	hat you answertly amounts.	I am amplexed by	the Feeilites common

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(OVER)			



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Please verify your information shown on this application and make any corrections as needed. Operator Certification Number: 9971 Certification(s) shown 4/1/2024 below will expire on: BRANDON J. GREENE, SR. 926 HARWOOD RD The fee to renew these \$50 certifications: HAGERSTOWN MD 21740 Failure to complete or submit renewal requirements by the expiration date will result in an additional late fees as described in Section V. I. CERTIFICATES TO RENEW: **Training Units** Certification Type Class Required Category **OPERATOR** WATER DISTRIBUTION 1 16 II. CURRENT EMPLOYMENT INFORMATION Employer's Name: Phone #: Number of Facilities (or Plants) that you currently operate: I am employed by the Facility owner I am currently not operating any Facility I provide contractual services to the Facility Please provide the following information about each Facility/Plant that you operate. Use additional pages as needed. PDWIS (Water) NPDES (Wastewater) Facility / Plant Name Class (OVER)



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