



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

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 your 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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **0749**

ALVARADO

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



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Operator Certification Number: **0756**

RAAB

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WATER TREATMENT	1	16
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WASTEWATER TREATMENT	A	16
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	A	7

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

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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III. 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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Date _____

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Operator Certification Number: 0872

WOLFREY

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The fee to renew these certifications: \$50

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I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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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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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **0875**

BALLANTYNE

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I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER DISTRIBUTION	1	16

II. CURRENT EMPLOYMENT INFORMATION

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(OVER)



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Operators In Training must work under the direction of an Operator in Responsible Charge.

Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: 0942

SAVOY

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Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: \$50

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I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **0956**

SWARTZ

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I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
SUPERINTENDENT	WASTEWATER TREATMENT	A	7
SUPERINTENDENT	WASTEWATER TREATMENT	S	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	4	7
TEMPORARY	WATER TREATMENT	5AS	24

II. CURRENT EMPLOYMENT INFORMATION

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: 0996

LANE

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: OPERATOR, WATER TREATMENT, 4, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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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.

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Operator Certification Number: **1035**

BOND

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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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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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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:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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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 _____

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Operator Certification Number: **10557**

GARCIA

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

- 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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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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**APPLICATION FOR CERTIFICATION RENEWAL
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Please verify your information shown on this application and make any corrections as needed.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **10578**

SETH

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WATER TREATMENT	4	45
TEMPORARY	WATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **1058**

TANNER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WASTEWATER COLLECTION	2	16
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: **10780**

KYLE

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The fee to renew these certifications: **\$100**

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	Training Units 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: _____

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **10795**

BARNES

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	A	24
TEMPORARY	WASTEWATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **10798**

MITTS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WASTEWATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 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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APPLICATION FOR CERTIFICATION RENEWAL
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Operator Certification Number: 10799

BOOTH

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: OPERATOR, WATER TREATMENT, 4, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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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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**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **10803**

HOPKINS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	4	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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 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:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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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.

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Operator Certification Number: **10804**

BRENGLE

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WATER TREATMENT	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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

- 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:

V. LATE FEES AND REINSTATEMENT

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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 _____

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

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Operator Certification Number: **10806**

BURDETTE

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	4	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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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:

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **10807**

JACKSON

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 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.

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Operator Certification Number: **11120**

LANKENAU

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: **11249**

PERSING

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	A	7

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	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

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Operator Certification Number: 11475

DEVILBISS

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: TEMPORARY, WATER TREATMENT, 4, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

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Operator Certification Number: **11553**

POFFENBERGER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WATER TREATMENT	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: **1172**

KREMPEL

Certification(s) shown below will expire on: **2/1/2025**

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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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **1199**

YOST

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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

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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12002**

PIPIK

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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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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**APPLICATION FOR CERTIFICATION RENEWAL
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Please verify your information shown on this application and make any corrections as needed.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12179**

HEINES

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	6	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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

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

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This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **1218**

GAITHER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units 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 operate. Use additional pages as needed.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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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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:

V. LATE FEES AND REINSTATEMENT

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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 _____

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

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Operator Certification Number: 12184

HENDRICKSON

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water) NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **12247**

COVERDALE

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	6	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



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

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.

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

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: 12291

FOY

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple rows for facility information.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

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Operator Certification Number: **12292**

LARIMORE

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	A	24
TEMPORARY	WATER TREATMENT	1	24
TEMPORARY	WASTEWATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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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 _____

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

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12293**

RAMELIZE

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units 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

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)



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

III. CONTINUING EDUCATION:

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.
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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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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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12294**

YATES

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
TEMPORARY	WATER TREATMENT	1	24
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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Operator Certification Number: **12296**

HALLER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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Operators In Training must work under the direction of an Operator in Responsible Charge.

Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Date _____

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Operator Certification Number: 12297

COLLINS

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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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: TEMPORARY, WASTEWATER TREATMENT, S, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple rows for facility information.

(OVER)



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

III. CONTINUING EDUCATION:

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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

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**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12300**

FREGOSO

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	6	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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Applicant's Signature: _____

Date _____

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

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Operator Certification Number: **12308**

SCHAEFFER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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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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Operator Certification Number: **12309**

JONES

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	A	24
TEMPORARY	WATER TREATMENT	2	24
TEMPORARY	WASTEWATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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.
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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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 _____

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Operator Certification Number: **12310**

THOMAS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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

- 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:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____ Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **12311**

SMITH

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units 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

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)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

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Operator Certification Number: **12312**

HALL

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WATER TREATMENT	4	45

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

Number of Facilities (or Plants) that you currently operate: _____

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I provide contractual services to the Facility

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12313**

CRENSHAW

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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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- 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 _____

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I consent to receive my certificate(s) by email in lieu of mail



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

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Operator Certification Number: 12314

SIGWART

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: TEMPORARY, INDUSTRIAL WASTEWATER, 6, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 renewal are outlined in COMAR 26.06.01.16 (Table 8).
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12315**

SMITH

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units 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

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)



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

III. CONTINUING EDUCATION:

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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

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

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This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: 12316

BLADES

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: TEMPORARY, WATER TREATMENT, 4, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple rows for listing facilities.

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

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Operator Certification Number: 12318

DORSEY

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

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Operator Certification Number: **12319**

GALLA

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	A	24
TEMPORARY	WATER TREATMENT	4	45
TEMPORARY	INDUSTRIAL WASTEWATER	2	0

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	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12320**

SAWYERS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	2	0
TEMPORARY	WATER TREATMENT	4	45
TEMPORARY	WASTEWATER TREATMENT	3	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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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 _____

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

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12321**

MCDANIEL

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
TEMPORARY	WATER TREATMENT	1	24
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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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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 _____

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

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Operator Certification Number: 12322

BARRETT

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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 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:

V. LATE FEES AND REINSTATEMENT

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

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Operator Certification Number: 12324

WILLARD

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: TEMPORARY, INDUSTRIAL WASTEWATER, 5, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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.
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.
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **12327**

FRONDORF

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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Operators In Training must work under the direction of an Operator in Responsible Charge.

Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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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.

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Operator Certification Number: **12328**

BOOTH

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: 12329

BELCHER

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: TEMPORARY, INDUSTRIAL WASTEWATER, 5, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

- 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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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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**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12330**

BIXLER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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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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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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12331**

PHILLIPS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units 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

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)



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

III. CONTINUING EDUCATION:

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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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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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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**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.

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Operator Certification Number: **12332**

JONES

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units 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

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)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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MARYLAND BOARD OF WATERWORKS AND WASTE SYSTEMS OPERATORS**

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Operator Certification Number: **12333**

MORALES

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units 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

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)



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

III. 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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12334**

ZERNHELT

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	5	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

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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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**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **12335**

BEDNAR

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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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.

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Operator Certification Number: **12336**

JONES

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
Operators In Training must work under the direction of an Operator in Responsible Charge.

Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: **12337**

RIGGLEMAN

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

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Operator Certification Number: **1317**

EDWARD

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Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER DISTRIBUTION	1	16

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

Number of Facilities (or Plants) that you currently operate: _____

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **13184**

CREWS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WATER DISTRIBUTION	1	24

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

Number of Facilities (or Plants) that you currently operate: _____

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: **1339**

ROWLAND

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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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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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **1395**

SMITH, SR.

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	3	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

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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)



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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: 1447

LUDLOW

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: **1450**

DRALLMEIER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. 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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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MARYLAND BOARD OF WATERWORKS AND WASTE SYSTEMS OPERATORS**

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Operator Certification Number: **1685**

WOODS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
SUPERINTENDENT	WATER TREATMENT	4	7

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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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. 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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Date _____

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Operator Certification Number: **2106**

BRANTNER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
SUPERINTENDENT	WATER TREATMENT	5DE	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WATER TREATMENT	4	7
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WATER TREATMENT	5DE	16
OPERATOR	WATER TREATMENT	4	30
SUPERINTENDENT	WASTEWATER TREATMENT	A	7

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

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **2110**

BECKER

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Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	4	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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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:

V. LATE FEES AND REINSTATEMENT

- 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 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 _____

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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**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.

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Operator Certification Number: **2233**

GOSNELL

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WASTEWATER COLLECTION	2	16
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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Operators In Training must work under the direction of an Operator in Responsible Charge.

Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **2297**

CLARK

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WASTEWATER TREATMENT	A	16
SUPERINTENDENT	INDUSTRIAL WASTEWATER	2	0
SUPERINTENDENT	WASTEWATER TREATMENT	A	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	3	7
SUPERINTENDENT	WATER TREATMENT	5GW	7
SUPERINTENDENT	WATER TREATMENT	4	7
OPERATOR	WASTEWATER TREATMENT	3	30
OPERATOR	WATER TREATMENT	5GW	16
OPERATOR	WATER TREATMENT	4	30
OPERATOR	WATER TREATMENT	2	16
OPERATOR	WATER TREATMENT	1	16
OPERATOR	INDUSTRIAL WASTEWATER	7	16
OPERATOR	INDUSTRIAL WASTEWATER	2	0
OPERATOR	WASTEWATER TREATMENT	5	30
SUPERINTENDENT	INDUSTRIAL WASTEWATER	7	7

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	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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

- 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:

V. LATE FEES AND REINSTATEMENT

- 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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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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**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **2430**

SMITH

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	INDUSTRIAL WASTEWATER	6	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **2453**

ALLEN

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units 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 operate. Use additional pages as needed.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **2501**

SMITH, III

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WASTEWATER COLLECTION	2	16

II. CURRENT EMPLOYMENT INFORMATION

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Number of Facilities (or Plants) that you currently operate: _____

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(OVER)



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

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Name and Certification Number of Operator in Responsible Charge:

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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **2504**

YOUNG

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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Applicant's Signature: _____

Date _____

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Operator Certification Number: **2685**

MATHIEU

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WATER TREATMENT	3	30
OPERATOR	WASTEWATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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.
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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VII. APPLICANT'S STATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: 2691

DUDOK

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: OPERATOR, WATER TREATMENT, 4, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____ Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **2738**

BURTON, JR.

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units 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 operate. Use additional pages as needed.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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VII. APPLICANT'S STATEMENT

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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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APPLICATION FOR CERTIFICATION RENEWAL
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Operator Certification Number: 2820

BULLOCK

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **2883**

SMITH, JR.

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	A	7

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

Number of Facilities (or Plants) that you currently operate: _____

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

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Name and Certification Number of Operator in Responsible Charge:

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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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **2884**

KOSMALSKI

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WASTEWATER COLLECTION	2	16
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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Applicant's Signature: _____ Date _____

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Operator Certification Number: **3116**

STRITE

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	INDUSTRIAL WASTEWATER	7	16
OPERATOR	WASTEWATER TREATMENT	6	16
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WATER TREATMENT	2	16
OPERATOR	INDUSTRIAL WASTEWATER	2	0
OPERATOR	WATER TREATMENT	4	30
OPERATOR	WATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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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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:

V. LATE FEES AND REINSTATEMENT

- 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.
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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 _____

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Operator Certification Number: 3203

PHILLIPS II

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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

- 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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **3379**

BAILEY

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WATER TREATMENT	3	30
SUPERINTENDENT	WATER TREATMENT	3	7

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	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

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Operator Certification Number: **3521**

CANTER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WASTEWATER 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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **3956**

SMITH

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Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: 3961

CAMPBELL

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: OPERATOR, INDUSTRIAL WASTEWATER, 2, 0

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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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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.

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Operator Certification Number: **4176**

EASLEY

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	INDUSTRIAL WASTEWATER	2	0

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	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

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Operator Certification Number: **4691**

SHOWELL

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
SUPERINTENDENT	WASTEWATER TREATMENT	5	7

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	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: 4857

HOWELLS

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Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: OPERATOR, WATER TREATMENT, 4, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

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Operator Certification Number: **4872**

FOSTER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	A	24
TEMPORARY	WASTEWATER TREATMENT	5	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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

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Name and Certification Number of Operator in Responsible Charge:

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Operator Certification Number: **4895**

WILLEN

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Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



APPLICATION FOR CERTIFICATION RENEWAL
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V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail



**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **4923**

LOCKHART, JR.

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units 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 operate. Use additional pages as needed.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

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Operator Certification Number: 4933

MOSES

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: OPERATOR, WATER TREATMENT, 4, 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple empty rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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

- 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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **4937**

WANCOWICZ

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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

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Operator Certification Number: 4961

LEPUS

Certification(s) shown below will expire on: 2/1/2025

Please enter you're current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Row 1: 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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple rows for data entry.

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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**APPLICATION FOR CERTIFICATION RENEWAL
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Please verify your information shown on this application and make any corrections as needed.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **4972**

FRETT

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	4	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____ Date _____

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Operator Certification Number: **5172**

KNIGHT

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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VII. APPLICANT'S STATEMENT

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- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

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**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **5919**

BUTLER

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WASTEWATER COLLECTION	2	16
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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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).
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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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Operator Certification Number: **6976**

MORTON

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

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Operator Certification Number: **7216**

KENNEDY

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WATER TREATMENT	1	16
OPERATOR	WASTEWATER TREATMENT	1	16

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

Number of Facilities (or Plants) that you currently operate: _____

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I provide contractual services to the Facility

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

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Operators In Training must work under the direction of an Operator in Responsible Charge.

Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____

Date _____

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Operator Certification Number: **7581**

MANGOLD

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
SUPERINTENDENT	INDUSTRIAL WASTEWATER	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	A	7

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

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **7898**

SCHWINABART

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	INDUSTRIAL WASTEWATER	2	0

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

Number of Facilities (or Plants) that you currently operate: _____

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(OVER)



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

III. CONTINUING EDUCATION:

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

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Name and Certification Number of Operator in Responsible Charge:

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Operator Certification Number: **8088**

WILLIAMS

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The fee to renew these certifications: **\$50**

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I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
TEMPORARY	WASTEWATER TREATMENT	5	45
TEMPORARY	WASTEWATER TREATMENT	A	24

II. CURRENT EMPLOYMENT INFORMATION

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(OVER)



APPLICATION FOR CERTIFICATION RENEWAL
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

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**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.

This is page one of a two page form. Both pages must be completed and returned.

Operator Certification Number: **8798**

FERRIS

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	INDUSTRIAL WASTEWATER	7	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(OVER)



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

III. CONTINUING EDUCATION:

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.
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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.
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:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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Operator Certification Number: 8890

BOYD

Certification(s) shown below will expire on: 2/1/2025

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Rows include TEMPORARY WASTEWATER TREATMENT with classes 5 and A.

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.

Table with 3 columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Multiple rows for facility details.

(OVER)



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

III. CONTINUING EDUCATION:

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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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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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Operator Certification Number: **9137**

SMITH, SR.

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WASTEWATER TREATMENT	A	16
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	A	7

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	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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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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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Operator Certification Number: **9673**

DAVID

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	2	16
OPERATOR	WATER TREATMENT	3	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.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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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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:

V. LATE FEES AND REINSTATEMENT

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Operator Certification Number: **9811**

SHREVE, JR.

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

The fee to renew these certifications: **\$100**

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	Training Units Required
OPERATOR	WATER TREATMENT	2	16
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 operate. Use additional pages as needed.

Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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Applicant's Signature: _____ Date _____

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Operator Certification Number: **9917**

POWELL, JR.

Certification(s) shown below will expire on: **2/1/2025**

Please enter your current address on the lines below and, if necessary, correct the City, state and ZIP Code. Please print legibly.

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.

I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WASTEWATER TREATMENT	5	30

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

Number of Facilities (or Plants) that you currently operate: _____

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I am currently not operating any Facility

I provide contractual services to the Facility

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Facility / Plant Name	Class	PDWIS (Water)	NPDES (Wastewater)

(OVER)



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

III. CONTINUING EDUCATION:

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.
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 Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

- 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 _____

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

* AN INCOMPLETE APPLICATION WILL BE RETURNED *

[] I consent to receive my certificate(s) by email in lieu of mail