



**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: **0375**

GIBSON

Certification(s) shown below will expire on: **8/1/2026**

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 OPERATOR	WASTEWATER TREATMENT	A	7
TEMPORARY	WATER TREATMENT	4	30
SUPERINTENDENT	WASTEWATER TREATMENT	4	24
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WATER TREATMENT	4	7
SUPERINTENDENT	WATER TREATMENT	3	7
SUPERINTENDENT	WATER TREATMENT	1	7
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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.
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: **0477**

HARRISON

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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: **\$100**

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I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
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OPERATOR	WASTEWATER TREATMENT	4	30
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WASTEWATER TREATMENT	A	16
SUPERINTENDENT	WATER TREATMENT	4	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
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

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

(OVER)

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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.
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

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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: 0635

CAMPBELL

Certification(s) shown below will expire on: 8/1/2026

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 rows for facility information.

(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: **0663**

DEGIACOMO

Certification(s) shown below will expire on: **8/1/2026**

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

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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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Applicant's Signature _____

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Operator Certification Number: 0686

LEWIS

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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

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I. CERTIFICATES TO RENEW:

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

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(OVER)

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Operator Certification Number: **0746**

KING

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I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	4	30

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(OVER)

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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

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: **0762**

TRIPLETT

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 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.

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Operator Certification Number: **0780**

BRADLEY

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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: 0792

SCHULTZ

Certification(s) shown below will expire on: 8/1/2026

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 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.

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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**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: **0829**

BAUCOM, JR.

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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 _____

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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: **0843**

WARD

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **0850**

CHAMBLISS

Certification(s) shown below will expire on: **8/1/2026**

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 COLLECTION	2	16
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 *

[] 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: **0955**

DAVIS

Certification(s) shown below will expire on: **8/1/2026**

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	WASTEWATER TREATMENT	5	30
OPERATOR	WATER TREATMENT	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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: **10134**

MUSSER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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: **10141**

MONTOYA

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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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: 10152

VOLK

Certification(s) shown below will expire on: 8/1/2026

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Applicant's Signature _____

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Operator Certification Number: **1016**

PINKINE

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.

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Operator Certification Number: **10162**

BENNETT

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

III. CONTINUING EDUCATION:

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Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
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: 10167

LIAU

Certification(s) shown below will expire on: 8/1/2026

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, 1, 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 rows for listing facilities.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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

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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
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: **10170**

STONE

Certification(s) shown below will expire on: **8/1/2026**

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
OPERATOR	WATER TREATMENT	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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: 10172

BOSWELL

Certification(s) shown below will expire on: 8/1/2026

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, 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 rows for listing facilities.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

- 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: **10175**

HORNBERGER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

- 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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MARYLAND BOARD OF WATERWORKS AND WASTE SYSTEMS OPERATORS**

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Operator Certification Number: **10176**

SEADERS

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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APPLICATION FOR CERTIFICATION RENEWAL
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Operator Certification Number: 10201

FOX

Certification(s) shown below will expire on: 8/1/2026

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: 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.

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

(OVER)

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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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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

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.

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: 10217

WATFORD

Certification(s) shown below will expire on: 8/1/2026

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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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: 10237

SECRET

Certification(s) shown below will expire on: 8/1/2026

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, 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.

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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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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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: **10249**

GRUPPER

Certification(s) shown below will expire on: **8/1/2026**

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	INDUSTRIAL WASTEWATER	6	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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 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: **10256**

GERSTNER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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Operator Certification Number: **10406**

FULTON

Certification(s) shown below will expire on: **8/1/2026**

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:

Certification Type	Category	Class	Training Units Required
OPERATOR	WATER TREATMENT	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **10471**

ZAVALA GUARDADO

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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
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

- 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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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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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: **10542**

GROSS

Certification(s) shown below will expire on: **8/1/2026**

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	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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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: **10578**

SETH

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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: **10635**

HARTMAN

Certification(s) shown below will expire on: **8/1/2026**

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

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **10800**

LUHN

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **10921**

CERUZZI

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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

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **11192**

THOMPSON

Certification(s) shown below will expire on: **8/1/2026**

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	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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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



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: 1138

SMITH

Certification(s) shown below will expire on: 8/1/2026

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:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Rows include OPERATOR for WATER DISTRIBUTION and OPERATOR for WASTEWATER COLLECTION.

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: Phone #: I am employed by the Facility owner

Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility

I am currently not operating any Facility

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

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

(OVER)

(Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

Applicant's Signature _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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MARYLAND BOARD OF WATERWORKS AND WASTE SYSTEMS OPERATORS

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Operator Certification Number: 11394

MILLER

Certification(s) shown below will expire on: 8/1/2026

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, 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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 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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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: **11432**

DVORNICKY

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 _____

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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: **11434**

DICKERSON

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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: 11442

SHIFLETT

Certification(s) shown below will expire on: 8/1/2026

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, 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.

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

(OVER)

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

III. 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 _____

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: **11446**

HASTINGS

Certification(s) shown below will expire on: **8/1/2026**

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

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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:

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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



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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: **11453**

MARTIN

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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
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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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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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.

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Operator Certification Number: **11551**

PADDY

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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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: **11650**

CHAI

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Applicant's Signature _____

Date _____

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Operator Certification Number: **11651**

CHARAPP

Certification(s) shown below will expire on: **8/1/2026**

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	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: 11653

STUDEBAKER

Certification(s) shown below will expire on: 8/1/2026

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 #: I am employed by the Facility owner

Number of Facilities (or Plants) that you currently operate: I provide contractual services to the Facility

I am currently not operating any Facility

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

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

(OVER)

(Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **12190**

MALLERY

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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

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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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: **12201**

SCHULER

Certification(s) shown below will expire on: **8/1/2026**

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 DISTRIBUTION	1	16
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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

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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: **12214**

LINCOLN

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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: **12417**

EBBERTS

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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 _____

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APPLICATION FOR CERTIFICATION RENEWAL
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Operator Certification Number: 12431

LAING

Certification(s) shown below will expire on: 8/1/2026

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, 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 rows for listing facilities.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 _____

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Operator Certification Number: **12448**

GRIFFITH

Certification(s) shown below will expire on: **8/1/2026**

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

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

(OVER)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

Operator Certification Number: **12470**

GRIM

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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



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

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Operator Certification Number: **12703**

SNYDER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **1273**

GACEK

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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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Operator Certification Number: **1276**

REED

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
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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 _____

Last 4 digits of Social Security Number _____ Email Address _____

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

Operator Certification Number: **12849**

WILSON JR

Certification(s) shown below will expire on: **8/1/2026**

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	3	45
TEMPORARY	WATER TREATMENT	5AS	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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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

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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 _____

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Operator Certification Number: 12959

GWYNN SR

Certification(s) shown below will expire on: 8/1/2026

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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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.
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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: 12960

SATCHELL

Certification(s) shown below will expire on: 8/1/2026

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 rows for facility information.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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:

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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: **12961**

QUARRIE

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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: **12962**

CROCKETT

Certification(s) shown below will expire on: **8/1/2026**

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	3	45
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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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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: **12963**

SESAY

Certification(s) shown below will expire on: **8/1/2026**

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: _____ 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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

- 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: **12965**

SMITH

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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VII. APPLICANT'S STATEMENT

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Applicant's Signature _____

Date _____

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Operator Certification Number: **12974**

THESSSEN

Certification(s) shown below will expire on: **8/1/2026**

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 DISTRIBUTION	1	24
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **12975**

WARNER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 _____

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: **12976**

WINKLER

Certification(s) shown below will expire on: **8/1/2026**

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	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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: **12977**

BALL

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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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: **12978**

CERVANTES

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

Operator Certification Number: 12979

PERRICONE

Certification(s) shown below will expire on: 8/1/2026

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:

Table with 4 columns: Certification Type, Category, Class, Training Units Required. Rows include TEMPORARY WATER TREATMENT (Class 3, 45 units) and TEMPORARY WASTEWATER TREATMENT (Class 3, 45 units).

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 for facility information with columns: Facility / Plant Name, Class, PDWIS (Water), NPDES (Wastewater). Includes multiple blank rows for data entry.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

- 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: 12980

WISE

Certification(s) shown below will expire on: 8/1/2026

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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 _____

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: **12981**

PITSENBERGER

Certification(s) shown below will expire on: **8/1/2026**

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	1	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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Applicant's Signature _____

Date _____

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Operator Certification Number: **12982**

WHITE

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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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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: **12983**

MOORE

Certification(s) shown below will expire on: **8/1/2026**

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	5AS	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **12984**

WILLEY

Certification(s) shown below will expire on: **8/1/2026**

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	4	45
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **12985**

SMITH

Certification(s) shown below will expire on: **8/1/2026**

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

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

(OVER)

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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: **12986**

SINGFIELD

Certification(s) shown below will expire on: **8/1/2026**

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 #: _____

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

(OVER)

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APPLICATION FOR CERTIFICATION RENEWAL
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III. CONTINUING EDUCATION:

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For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application.
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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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 _____

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: **12987**

BLACK

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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Operator Certification Number: **12988**

HERNANDEZ

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **12989**

RITTER

Certification(s) shown below will expire on: **8/1/2026**

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	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 _____

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Operator Certification Number: **12990**

MONGELLI

Certification(s) shown below will expire on: **8/1/2026**

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: _____ 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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **12991**

WILLIAMS

Certification(s) shown below will expire on: **8/1/2026**

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	5	45
TEMPORARY	WASTEWATER TREATMENT	A	24
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

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: 12992

BUSBY

Certification(s) shown below will expire on: 8/1/2026

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, 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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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:

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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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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: **12993**

KENDLE

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

Applicant's Signature _____

Date _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **13134**

PYLES

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

III. CONTINUING EDUCATION:

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For all operator categories, except Water Class 1, Water Class 2, Water Class G, Water Distribution, and Wastewater Collection, a minimum of 50% of training units submitted for renewal shall be process related
Provide proof of training taken during the 3 year renewal period that ends with the expiration date noted on this application.
Examples of acceptable documentation include signed transcripts, certificates of completion, and official training cards.
Proof of training must be submitted with this application and include the Course Code (or TRE number), Course Title, date of completion, number of training hours and process (or non-process) designation.
Courses can be approved for multiple classifications and categories; the number of required training units is not necessarily cumulative.
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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 _____

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Operator Certification Number: **1466**

NEDDO

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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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: **1513**

STEVENS

Certification(s) shown below will expire on: **8/1/2026**

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
OPERATOR	WATER TREATMENT	5DE	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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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: **1525**

WHITE

Certification(s) shown below will expire on: **8/1/2026**

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)

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APPLICATION FOR CERTIFICATION RENEWAL
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Name and Certification Number of Operator in Responsible Charge:

V. LATE FEES AND REINSTATEMENT

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

Operator Certification Number: **1558**

CATES

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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



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

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Operator Certification Number: **1579**

CORBIN

Certification(s) shown below will expire on: **8/1/2026**

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:

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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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- 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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Operator Certification Number: 1738

DONITHAN

Certification(s) shown below will expire on: 8/1/2026

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 rows for facility information.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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: **1844**

JONES, JR.

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

- 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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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: **1854**

CANTY

Certification(s) shown below will expire on: **8/1/2026**

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:

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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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: 1856

CIANCITTO

Certification(s) shown below will expire on: 8/1/2026

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 facility information.

(OVER)

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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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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.

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: 1865

CHEATHAM

Certification(s) shown below will expire on: 8/1/2026

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: SUPERINTENDENT, INDUSTRIAL WASTEWATER, 6, 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.

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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
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* 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: 1867

FOY

Certification(s) shown below will expire on: 8/1/2026

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 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.

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Operator Certification Number: 2050

BACHTELL

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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 #: _____

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(OVER)

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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 _____

Last 4 digits of Social Security Number _____ Email Address _____

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Operator Certification Number: **2151**

WALKER, JR.

Certification(s) shown below will expire on: **8/1/2026**

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

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **2257**

LEWIS

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



APPLICATION FOR CERTIFICATION RENEWAL
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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: **2622**

SMITH

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I. CERTIFICATES TO RENEW:

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

II. CURRENT EMPLOYMENT INFORMATION

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(OVER)

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**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: **2755**

DOWN'S

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

Certification(s) shown below will expire on: **8/1/2026**

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	4	24
TEMPORARY	WATER TREATMENT	4	45
TEMPORARY	INDUSTRIAL WASTEWATER	6	24
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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



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MARYLAND BOARD OF WATERWORKS AND WASTE SYSTEMS OPERATORS**

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Operator Certification Number: **2911**

MARIANO

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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

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Operator Certification Number: **3303**

MEDDLES

Certification(s) shown below will expire on: **8/1/2026**

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	WASTEWATER TREATMENT	5	7
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WASTEWATER 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

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **3329**

ELLIOTT

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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- 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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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: **3642**

HAIDEN

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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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 _____

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Operator Certification Number: 3776

CLARK

Certification(s) shown below will expire on: 8/1/2026

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 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 rows for listing facilities.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



APPLICATION FOR CERTIFICATION RENEWAL
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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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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: **4206**

GOOD

Certification(s) shown below will expire on: **8/1/2026**

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	WASTEWATER COLLECTION	2	7
SUPERINTENDENT	WATER DISTRIBUTION	1	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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Operator Certification Number: **4406**

LUCAS

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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Operator Certification Number: **4430**

MARROW

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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VII. APPLICANT'S STATEMENT

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Applicant's Signature _____

Date _____

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Operator Certification Number: **4525**

WALKER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: 4568

MILLER

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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 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 rows for facility information.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **4684**

HOTT

Certification(s) shown below will expire on: **8/1/2026**

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	4	7
SUPERINTENDENT	WASTEWATER TREATMENT	A	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
OPERATOR	WATER TREATMENT	4	30
SUPERINTENDENT	WASTEWATER TREATMENT	4	7
SUPERINTENDENT	WASTEWATER TREATMENT	3	7
SUPERINTENDENT	WATER TREATMENT	3	7
SUPERINTENDENT	WATER TREATMENT	1	7
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WASTEWATER TREATMENT	4	30
OPERATOR	WASTEWATER TREATMENT	5	30

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

III. CONTINUING EDUCATION:

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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: **4768**

GASTON

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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: **4782**

SWANN

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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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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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: **4833**

TURNER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 _____

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Operator Certification Number: **4860**

WALSH

Certification(s) shown below will expire on: **8/1/2026**

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	WASTEWATER TREATMENT	5	30
OPERATOR	WATER TREATMENT	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **5205**

THOMAS, JR.

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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 _____

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Operator Certification Number: **5369**

YODER

Certification(s) shown below will expire on: **8/1/2026**

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

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

(OVER)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

- 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 _____

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

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

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

Operator Certification Number: **5549**

GREEN

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **6016**

ALLEN, JR.

Certification(s) shown below will expire on: **8/1/2026**

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**

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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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: 6031

CARDOSI, JR.

Certification(s) shown below will expire on: 8/1/2026

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 rows for facility information.

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

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Operator Certification Number: **6086**

LEE

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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: **\$100**

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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 #: _____

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(OVER)

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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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Operator Certification Number: **6506**

SIMANOVSKY

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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: **\$100**

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I. CERTIFICATES TO RENEW:

Certification Type	Category	Class	Training Units Required
OPERATOR	WASTEWATER TREATMENT	5	30
SUPERINTENDENT	WASTEWATER TREATMENT	A	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	4	7
OPERATOR	WASTEWATER TREATMENT	A	16
OPERATOR	WASTEWATER TREATMENT	4	30
OPERATOR	WATER TREATMENT	5	16
OPERATOR	WATER TREATMENT	4	30
SUPERINTENDENT	WATER TREATMENT	4	7

II. CURRENT EMPLOYMENT INFORMATION

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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: **7490**

CUMMINGS

Certification(s) shown below will expire on: **8/1/2026**

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	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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



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Operator Certification Number: **7600**

CARROLL

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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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.
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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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Operator Certification Number: **7803**

BARGER

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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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: 8124

SMITH, JR.

Certification(s) shown below will expire on: 8/1/2026

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 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.

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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: **8200**

BAYS

Certification(s) shown below will expire on: **8/1/2026**

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

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **8304**

BARNHILL

Certification(s) shown below will expire on: **8/1/2026**

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	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WASTEWATER TREATMENT	A	7
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WATER TREATMENT	G	7
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



APPLICATION FOR CERTIFICATION RENEWAL
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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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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: **8312**

STEWART

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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.
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Applicant's Signature _____

Date _____

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Operator Certification Number: **8488**

FRASER

Certification(s) shown below will expire on: **8/1/2026**

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
TEMPORARY	WASTEWATER TREATMENT	4	24
SUPERINTENDENT	WASTEWATER TREATMENT	A	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WATER TREATMENT	1	7
OPERATOR	WASTEWATER TREATMENT	5	30
OPERATOR	WATER TREATMENT	1	16
SUPERINTENDENT	WASTEWATER 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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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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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Applicant's Signature _____

Date _____

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Operator Certification Number: **8613**

CRIST

Certification(s) shown below will expire on: **8/1/2026**

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: _____ 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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **9001**

LAWS

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **9123**

HAMILTON

Certification(s) shown below will expire on: **8/1/2026**

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	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

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

(OVER)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **9207**

TAYLOR

Certification(s) shown below will expire on: **8/1/2026**

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	WASTEWATER COLLECTION	2	7
SUPERINTENDENT	WATER DISTRIBUTION	1	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)

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

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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.
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.
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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**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: **9275**

ARNESON

Certification(s) shown below will expire on: **8/1/2026**

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:

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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

- 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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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: 9291

CAMPBELL

Certification(s) shown below will expire on: 8/1/2026

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: 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 []

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **9542**

JARRELL

Certification(s) shown below will expire on: **8/1/2026**

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	5AS	7
SUPERINTENDENT	WASTEWATER TREATMENT	5	7
SUPERINTENDENT	WATER TREATMENT	3	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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **9584**

GLENN

Certification(s) shown below will expire on: **8/1/2026**

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	4	30
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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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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Operator Certification Number: **9759**

SMITH

Certification(s) shown below will expire on: **8/1/2026**

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

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)

____ (Initial Here) I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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: **9796**

KRAMER JR

Certification(s) shown below will expire on: **8/1/2026**

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)

____ (Initial Here)

I hereby affirm I have completed the mandatory Cybersecurity training and have included the certificate of completion with this renewal.



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



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.

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: 9811

SHREVE, JR.

Certification(s) shown below will expire on: 8/1/2026

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 TREATMENT, 4, 30

II. CURRENT EMPLOYMENT INFORMATION

Employer's Name: _____ Phone #: _____

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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)

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

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Applicant's Signature _____ Date _____

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