



**STATE OF NEVADA
WASTEWATER TREATMENT PLANT OPERATOR
APPLICATION FOR RESTRICTED CERTIFICATION**

(Revised September 2020)

Full Name: _____ **Grade Applying For:** _____
(Please print/type your name as you want it to appear on certificate) (I, II, III, or IV)

Address: _____ **Home Phone:** _____
(Street Number) (City) (State) (Zip Code)

Email Address: _____ **Cell Phone:** _____

Are you a veteran of the United States Armed Forces: Yes No **MOS & Branch:** _____

NOTE: The operator is responsible to notify Administrator of future address changes.

EXAMINATION: Computer or Written

Restricted certificates allow an operator to take the examination one certification grade level above their present certification level. A recipient of a restricted certificate can gain full certification at the tested grade level upon satisfaction of the experience requirement for that grade level.

To apply for certification as an operator of a **wastewater treatment**, a person must **be able to demonstrate the required operating experience delineated in NAC 445A.2862, be at least 18 years of age, and meet the following minimum education requirements:**

1. Restricted certificates shall not carry regulatory authority to operate a wastewater treatment plant at the restricted grade level and shall be subject to the following eligibility requirements:

Restricted Grade I: A high school diploma, GED, or equivalent, general educational development certificate or equivalent. **Include High School Diploma or Equivalent with application.**

Restricted Grade II: Hold an active unrestricted Grade I certification for a minimum of one year and meet the Grade II educational requirements.

Restricted Grade III: Hold an active unrestricted Grade II certification for a minimum of one year and meet the Grade III educational requirements.

Restricted Grade IV: Hold an active unrestricted Grade III certification for a minimum of one year and meet the Grade IV educational requirements.

2. Upon meeting educational eligibility requirements, a person must pass the certification examination for the restricted grade level being sought.

3. A restricted certificate may be converted to an unrestricted full certification upon meeting the experience requirement for the equivalent unrestricted certification.

Total Amount of Experience as a Wastewater Treatment Plant Operator: _____ **Years** _____ **Months**
(List only full-time or equivalent (FTE) operator employment)

PRESENT EMPLOYMENT

Employer: _____ **Employer's Phone #:** _____

Date of Hire: _____

Address: _____

Job Title: _____ **Length of Service as an operator:** _____

Wastewater Operators perform a variety of tasks in the course of their daily duties. Some of these tasks are relevant to other certifications. If you wish to claim time associated with tasks in these disciplines, please indicate the percentage of time spent on those tasks. Please note that excessive time in any category outside of Treatment may impact your FTE equivalent. If you do not complete this section, 100% of your time will be allocated to wastewater treatment plant operations.

Wastewater% _____ Give a description of your Wastewater Operator Duties: _____

Plant Maintenance % _____ Give a description of your Maintenance Duties: _____

Wastewater Quality Analyst % _____ Give a description of your Analyst Duties: _____

Other Disciplines% _____ Give a description of your Other Discipline/Duties: _____

Other% disciplines/duties will be subtracted from your Wastewater experience

Total Percentage of all Duties: _____ (should total 100%)

PRESENT EMPLOYER'S WASTEWATER TREATMENT FACILITIES

Type of Treatment: _____ Treatment Capacity: Average _____ MGD Maximum _____ MGD

Type of Agency: Public Private Other: _____

Brief Description of Treatment Plant: _____

Plant Classification as defined by NAC 445A.289: Grade 1 Grade 2 Grade 3 Grade 4

SUPERVISOR

Person who can attest to Present Employment duties and Treatment Facility Information

Name/Title of Supervisor: _____ Signature of Supervisor / Date _____

I am aware that there are significant penalties for attesting to false information

PREVIOUS WASTEWATER TREATMENT PLANT OPERATOR WORK EXPERIENCE

Dates of Service	Total Years	Employer's Name/Address/Phone	Your Position/Supervisor's Name

Summarize any additional experience you have had which qualifies you for certification as a wastewater treatment plant operator: _____

EDUCATION

List below the name of school, location, city and state in which you attended school	Years Attended	List Science, Engineering or Wastewater Courses and Degree(s) Obtained
(a) High School		
(b) College		

CEUs or Post Secondary

COURSE	HOURS	COURSE	HOURS

WASTEWATER PROFESSIONAL CODE OF CONDUCT

The Wastewater Professional Code of Conduct requires certificants holding Wastewater Treatment Plant Operator, Collection System Operator, Industrial Waste Operator, Industrial Waste Inspector, Plant Maintenance Technologist and Wastewater Quality Analyst certifications to act honestly, competently, and with integrity and to use their knowledge and skill for protection of the environment. As a condition of holding and maintaining a Nevada certification, I agree to:

- Be truthful and accurate in what I say, do, and write.
- Adhere to all laws and regulations applicable to the profession.
- Promote and encourage the highest quality of wastewater facility/system operation within the industry.
- Not misrepresent nor permit misrepresentation of my qualifications or the qualifications of my associates.
- Not conduct myself in a manner that subverts or attempts to subvert the minimum certification requirements, application processes, or examination processes.
- Uphold and follow all certification policies and procedures.

NAC 445A.293 Plants for sewage treatment: Denial of application for certificate or suspension or revocation of certificate. (NRS 445A.425) The Division may deny an application for a certificate as an operator of a plant for sewage treatment or suspend or revoke a full certificate, provisional certificate or restricted certificate if the applicant or holder of the certificate:

1. In applying for or obtaining a certificate, has submitted to the Division any application, document, record, report or affidavit, or any information in support thereof, which is false or fraudulent;
2. Is grossly negligent, incompetent or has committed misconduct in the performance of his or her duties as an operator of a plant for sewage treatment;
3. Has demonstrated disregard for the health and safety of the public and the environment;
4. Has acted outside the rights and privileges of the grade for which he or she holds a certificate;
5. Has been convicted of a violation of any federal law or law of any state relating to water quality, including, without limitation, the Clean Water Act, 33 U.S.C. §§ 1251 et seq.;
6. Has been convicted of a felony or other crime involving moral turpitude, dishonesty or corruption;
7. Has willfully made to a governmental agency with regulatory authority any false statement which is material to the administration or enforcement of any provision of this chapter or [chapter 445A](#) of NRS;
8. Has failed to renew his or her certification; or
9. Has violated, attempted to violate, assisted or abetted in the violation of or conspired to violate any provision of this chapter or [chapter 445A](#) of NRS.

I have read and understand NAC 445A. 293 regulations, I certify that the information provided, including attachments, is true and accurate. By signing this application, I agree to adhere to the Wastewater Professional Code of Conduct. If this information is found to be untrue or inaccurate, I am aware that my certification may be suspended or revoked.

DATE: _____ SIGNATURE: _____

<p>The nonrefundable application fee of \$90 payable to N.D.E.P. (<i>Nevada Division of Environmental Protection</i>) is due and payable at the time of filing this application.</p> <p><i>"Incomplete applications awaiting additional information and/or documentation will be forfeited after 90 days, upon which the candidate will need to submit a new application and fee".</i></p>	<p>MAIL TO: Wastewater Operator Certification Program Bureau of Water Pollution Control Nevada Division of Environmental Protection 901 S. Stewart, Suite 4001 Carson City, NV 89701 (775) 465-2045</p>
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Items Below for Board Use Only	
Payment Received: _____	
Check No.: _____	
Approved for Grade: _____	Not Approved <input type="checkbox"/> _____ <i>Administrator Signature</i>
Examination Date: _____	Examination Proctor: _____
Examination Location: _____	
Examination Score: _____	Pass <input type="checkbox"/> Fail <input type="checkbox"/>
Certificate Issued: _____	Certificate No.: _____