2025 Fall Solid Waste Landfill Operator Training

for New Certification



Type II and III Solid Waste Facility Operator Certification Training

This two-day course (with exam) is training for professionals pursuing careers in demolition/industrial waste, or municipal solid waste management. This course develops a level of competency to operate and inspect solid waste landfills.

The training consists of: Basic math, science, public health issues, rules & regulations, waste screening, asbestos, stormwater issues, facility operations and closure/post closure. Lunch will be provided.

Successful completion of the exam is required to become a certified operator. This certification is valid for three years.

New Certification Classes

Per Minn. R. 7048.0800, subp. 1, Type II and Type III new certification registrations require an Exam Application (pg. 3 and 4 of this form) in addition to the registration form. All forms must be received at least 15 days prior to the class date. Email address on forms is mandatory.

Municipal Solid Waste Certification Training

Type II | 15 contact hrs (Class limit 15) \$375 = \$345 Training Fee + \$15 Exam Fee + \$15 Issuance of Certification Fee

Agenda

Day 1 Training sessions 8 a.m. – 5 p.m.

Day 2 Training sessions 8 a.m. – 12 p.m.

Certification exam 1 p.m. – 3 p.m.

September 2-3, 2025

Clay County Resource Recovery Ctr 3322 15th Ave N Moorhead, MN 56560 Register by August 20

Demo & Industrial Certification Training

Type III | 9 contact hrs (Class limit to 20) \$375 = \$345 Training Fee + \$15 Exam Fee + \$15 Issuance of Certification Fee

Agenda

Day 1 Training sessions 8 a.m. – 5 p.m.

Day 2 Training sessions 8 a.m. – 12 p.m.

Certification exam 1 p.m. – 3 p.m.

☐ September 16-17, 2025

Dem-Con 13020 Dem-Con Drive Shakopee, MN 55379 Register by September 1

☐ October 7-8, 2025

MPCA Mankato office 12 Civic Center Plz, Ste 2165 Mankato, MN 56001 Register by September 22

☐ October 21-22, 2025

MPCA Duluth office 525 S Lake Ave., Ste 400A Duluth, MN 55802 Register by October 6

□ November 4-5, 2025

Hennepin Energy Recovery Ctr 435 N 5th St Minneapolis, MN 55405 Register by October 20

☐ December 2-3, 2025

Camp Ripley 15000 Highway 115 Little Falls, MN 56345 Register by November 17



Registration

- · No walk-in registrants will be accepted.
- Registrations that do not include the required exam application will not be accepted.
- Registration is managed on a first-come, first served basis. Registrants will be notified if their workshop is filled.
- Courses subject to cancellation due to low enrollment.
- For registration questions contact Samantha Koski
 651-757-2496 or 800-657-3864 samantha.koski@state.mn.us

US BANK will be charging a separate service fee of 2.15% for all credit card transactions and

your credit card statement, in addition to the MPCA charged training fee.

The exam application fee is nonrefundable

1.25% for all debit card transactions. A separate $\underline{\mathsf{non-refundable}}$ service fee will be displayed on

Refunds: To receive a refund for the training, you must cancel at least 48 hours before.

(Please copy to register more than one person.)

Complete and print this form.

Mail or fax it with your payment.

\$345 Training Fee + \$15 Exam Fee + \$15

Email without payment to:

online.

samantha.koski@state.mn.us to receive

an invoice and link for the option to pay

Issuance of Certification Fee = \$375



DO NOT email it as an attachment with credit card information!

Legal name (print) Training date & location Business/employer Business address City, State, ZIP Telephone Email (Required) Tennessen Warning: Some of the information you are being asked to provide on this form (i.e., some of your credit card details) is classified by state law (Minn. Stat. § 13.37, subd. 1a) as private data. You are being asked to provide this information to assist the Minnesota Pollution Control Agency in processing your training payment. You are not required to provide any of the requested information. If you provide the requested information, this will assist the agency in processing your payment. If you do not provide this information, the agency may be unable to process your payment. The private information that you provide will be available only to those within the agency and the State whose work assignments reasonably require access to it and to other entities/ persons authorized by law or court order. Credit Card Check ☐ American Express ☐ Visa ☐ MasterCard Check # Card # **Expires** Amount Cardholder name Security code payable to: Minnesota Pollution Control Agency Address Mail with payment to: Minnesota Pollution Control Agency City, State, ZIP ATTN: Fiscal - 6 520 Lafayette Rd. North Telephone Email (Required) St. Paul, MN 55155-4194 Amount **Fax** with payment to 651-797-1385. OR Cardholder signature



520 Lafayette Road North St. Paul, MN 55155-4194

Certification exam application for Type II and III waste disposal facilities Solid Waste Program

Doc Type: Certification Application

Instructions: Read this entire form and complete it in full. Incomplete applications will not be accepted. Please note the Tennessen warning on page 2.

Type II – Sanitary, modified sanitary, and sludge landfills.				MPCA Use Only			
Type III – Demolition waste and non-hazardous industrial waste facilities.		Company name:					
			Check number:				
For questions, please contact Samantha Koski at 651-757-2496 or samantha.koski@state.mn.us.			Amount of check:				
			Date of check:	Date of check:			
*Check certification (Req	uired: choose on): Date deposited:	•				
☐ Operator ☐ Inspe	ctor	Exam results:					
*Required – choose one fr	om below:	Exam/Issue date:	Exam/Issue date:				
☐ Type II ☐ Type	III		Certificate #:				
*Denotes required fiel	ld	Location of exam	::				
*A. General Inform	ation						
		First name*:		Middle initial:			
	esent position: Employer:						
				unty:			
Email*:							
Present MPCA participant			ness phone number:				
List all relevant short	courses, in-service hey must relate to	uired by MN Rule 7048.060 e training, extension, individ to the type of landfill certificat	ual college, courses, e ion for which you are a	applying.			
Course title	Course hours		1				
Course title	Course nours 3	Subject	Location	Dates			
*C. Experience Requestion How many months have you In what capacity?		7048.0600 as an operator or inspector	at this type of waste o	isposal facility?			

*D. Education Red	*D. Education Required by MN Rule 7048.0600								
Do you have a high sch									
Name of high school:									
Higher education									
College, university or vocational school	Dates attended	Major		Credits or degree	Date of graduation				
 E. Inspections (Inspectors only) List location of each inspection and name of certified inspector who accompanied you. You must complete 10 inspections in the presence of a certified inspector prior to taking the inspector exam Location of inspection Name of certified inspector 									
				- 1					
*F. Certification									
Tennessen warning: Pur name and designated addres as public data and become public designated address) will con processing your application. legally required to provide ar do not supply the requested application is pending, the nor required by law or court or Office of the Minnesota Attor for denying your application of	ss) until the time you are part of the MPCA's publication to be classified as The MPCA will use the the order of the requested information, it will be difful to public data that you surder. In such cases, it may general and person	e licensed/certified. Once you ce file. If you are not license not public data. You are be information when determin mation. If you supply the reficult for the MPCA to deter ubmitted will be available of ay then be shared with others contacted for purposes of	ou are licensed/certified d/certified, the informat eing asked to provide the ing your qualifications, it remine your qualifications, it are your qualifications of the information, it is authorized personal that is a considerable of verification or investigned.	d, all the information provided (except for your requested information to or obtaining a license/certi will be used to process your for licenser/certification. In the work of the Minnesota Department gation. Submitting false info	led will be classified our name and o assist the MPCA in fication. You are not ur application. If you While your I to those authorized of Revenue, the				
I declare that all information above.	ation provided is tru	e and complete. I here	by acknowledge th	at I have read and unc	lerstand the				
Print name:			Title:						
Signature:	ignature: D			Date (mm/dd/yyyy):					

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