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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Application for wastewater  certification reinstatement  Wastewater Operator Certification Program  Doc Type: Certification Application |

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| **MPCA Use Only** | |
| App check ID |  |
| App check # |  |
| Check amt |  |
| PM date |  |
| Deposit |  |
| Invoice |  |
| Approval | Approve  Deny |
| Issue date |  |
| Exp date |  |
| Certificate # |  |
|  |  |

**Note: Before completing this form, please read Tennessen warning on page 2.**

## Instructions(Read instructions carefully before completing application)

Application fees are **nonrefundable** even if you are found to be ineligible. Eligibility requirements are listed on the Minnesota Pollution Control Agency (MPCA) website at <https://www.pca.state.mn.us/sites/default/files/wq-wwtp8-13.pdf>. If you are found to be ineligible for reinstatement, your application fee may be used towards the exam application fee. If you have questions about your eligibility, contact Tracy Finch  
at 651-757-2103.

1. Type or print **neatly** in blue or black ink.
2. Complete both sides of this application, sign, and date it.
3. Make checks payable to **Minnesota Pollution Control Agency** or complete the *Credit card authorization* form attached.
4. This application fee **must** be included or application will be returned.
5. If you attended non-MPCA training, you must submit proof of attendance and training agenda/program.
6. Incomplete applications will be returned.

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| **Mail completed form to:** | **Attn: Fiscal Services - 6th floor**  Tracy Finch - Certification and Training Unit  Minnesota Pollution Control Agency  520 Lafayette Road North  St. Paul, Minnesota 55155-4194 |

## General information(This application form must be correctly filled out and all questions must be answered in full.)

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last name: | | |  | | | | | First name: |  | | | | Middle name/Initial: | | | | | |  |
| Designated mailing address: | | | | | |  | | | | | | | | | | | | | |
| City: |  | | | | | | | | | State: | |  | | | | Zip code: | |  | |
| Current employer: | | | |  | | | | | | Work phone or cell phone: | | | | | | |  | | |
| Email: | |  | | | | | | | | | | | | | | | | | |
| Wastewater certificate number: | | | | | | |  | | | | Expiration date: | | | |  | | | | |
| Home telephone number: | | | | |  | | | | | | Fax number: | | |  | | | | | |

Reinstatement fee schedule(Select only one examination below:)

|  |  |  |
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| **Wastewater facility  operator** | **Collection system  operator** | **Land application of biosolids operator/inspector  spray irrigation** |
| $40 Class A\* | $40 Class SA\* | $30 Type 4 Biosolids land application operator |
| $40 Class B | $40 Class SB | $30 Type 4 Biosolids land application inspector\*\* |
| $40 Class C | $40 Class SC | $30 Type 5 Spray operator |
| $40 Class D | $40 Class SD | $30 Type 5 Spray inspector\*\* |

*\* Class A or SA applicants must attach a current position description and work organization chart or chain-of-command flow chart.*

*\*\* Type 4 or 5 inspector applicants must attach a list of at least ten inspections completed in the presence of a certified inspector and the inspector’s name.*

## Contact hour requirements for reinstatement

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| --- | --- | --- | --- |
| Class A & SA | 32 hours | Type 4 Operator/Inspector | 6 hours |
| Class B & SB | 24 hours | Type 5 Operator/Inspector | 6 hours |
| Class C & SC | 16 hours |  |  |
| Class D & SD | 8 hours |  |  |

## Training courses attended

Fill in training courses you have attended. You must have attended approved training courses in the three years before your certificate expiration date. Training completed after certificate expiration date will not be considered. If you have attended courses other than MPCA course, you must submit proof of attendance and course agenda or program to be considered.

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|  |  | **Contact hours** | | | |
| **Date(s)** | **Training description and training provider** | **Wastewater (direct)** | **Type 4 or 5 (direct)** | **Water (related)** | **Other (related)** |
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## Signature

**Tennessen warning:** Pursuant to Minn. Stat. § 13.41, the information you provide on this application is classified as private data (except for your name and designated address) until the time you are licensed/certified. Once you are licensed/certified, all the information provided will be classified as public data and become part of the MPCA’s public file. If you are not licensed/certified, the information provided (except for your name and designated address) will continue to be classified as not public data. You are being asked to provide the requested information to assist the MPCA in processing your application. The MPCA will use the information when determining your qualifications for obtaining a license/certification. You are not legally required to provide any of the requested information. If you supply the requested information, it will be used to process your application. If you do not supply the requested information, it will be difficult for the MPCA to determine your qualifications for licenser/certification. While your application is pending, the not public data that you submitted will be available only to authorized personnel within the agency and to those authorized or required by law or court order. In such cases, it may then be shared with other agencies, including the Minnesota Department of Revenue, the Office of the Minnesota Attorney General and persons contacted for purposes of verification or investigation. Submitting false information is grounds for denying your application or suspending, revoking, or taking other disciplinary action against your credentials after it is issued.

**I declare that all information provided is true and complete. I hereby acknowledge that I have read and understand the information above.**

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| Signature: |  |  | Date: |  |

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| Minnesota Pollution Control Agency (MPCA), 520 Lafayette Road North, St. Paul, MN 55155-4194 | Credit card authorization  Wastewater Operator Certification Program |

**Instructions:** You may complete this form electronically; then print and mail or fax it with your payment.   
Do **not** email it as an attachment with credit card information.

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| **Send to:** | **Training registration:** | **Examination and certification applications:** |
|  | Christi Torgusson - 5th floor  Minnesota Pollution Control Agency  520 Lafayette Road North  St. Paul, Minnesota 55155-4194  651-757-2482 | Tracy Finch - 5th floor  Minnesota Pollution Control Agency  520 Lafayette Road North  St. Paul, Minnesota 55155-4194  651-757-2103 |
| **Secure fax:** | 651-797-1385 |  |

## Credit card information

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Visa  MasterCard | | | | | | Exact name on card: | |  | | | | | | | | | | |
| Card number: | | | |  | | | | | | 3-digit security code: | |  | | | Expiration date: | | |  |
| Address: | |  | | | | | | | | | | | | | | | | |
| City: |  | | | | | | | | | | State: |  | | | | Zip code: | |  |
| Phone number: | | | | |  | | | | Email address for receipt: | | | |  | | | | | |
| Name of person taking class/exam: | | | | | | |  | | | | | | | Date (mm/dd/yyyy): | | | |  |
| Signature: | | |  | | | | | | | | | | | | | | Amount: |  |

**Service fees**

US Bank will be charging a separate service fee of 2.15% for all credit card transactions and 1.25% for all debit card transactions after April 1, 2022. To avoid these service fees, you may submit your payment by mail to the Minnesota Pollution Control Agency (MPCA) at the address provided on your **Application for certification reinstatement**form.

**Check here to agree to pay the separate service fee of 2.15% to US Bank for credit card payment and 1.25% for debit card payment. Credit card payments after April 1, 2022 will not be processed if box is not checked.**