Application for Certification as a Class K (Industrial) Wastewater Treatment Works Operator

Instructions

1. Application must be typewritten or printed legibly. This application may be completed manually or online using Adobe Reader, a copy of it saved locally, printed, and signed before it is submitted to:

   Illinois Environmental Protection Agency
   Wastewater Operator Certification Program
   BOW/DWPC/CAS #19
   1021 North Grand Avenue East
   P.O. Box 19276
   Springfield, IL 62794-9276

   Applications that are emailed or faxed to the Illinois EPA will not be accepted. Applications must have original signatures.

2. Complete all sections of the application or it will be returned. Applicants for the general Class K-WR certification do not need to fill out the Industrial Wastewater Works Information section.

3. You MUST select BOTH a First Choice and Second Choice for requested exam date and location.

4. Job duties must be SPECIFIC to INDUSTRIAL WASTEWATER TREATMENT OR PRETREATMENT OPERATIONS.

5. Your supervisor MUST review the information in your application AND verify that it is true and accurate. Your supervisor MUST fill out, sign and date the verification section of the application or it will be returned.

6. You, the applicant, MUST sign and date the application or it will be returned.

7. There are currently NO FEES associated with the Wastewater Operator Certification Program.

8. Please keep a copy of your completed application for your records.

9. For questions about, or assistance with, filling out this application, please call: (217) 782-9720
Application for Certification as a Class K (Industrial) Wastewater Treatment Works Operator

Class K Certification Requested (Check One):

☐ Facility-specific Class K Industrial Site - A Class K certificate for a specific industrial site is only valid for the specific industrial wastewater treatment works or pretreatment works for which it has been issued.

☐ General Class K-WR for Water Remediation Systems - A Class K-WR certificate for water remediation systems is valid for all industrial wastewater treatment works or pretreatment works designed to remediate petroleum contamination from gasoline, diesel fuel, kerosene, jet fuel, or heating oil

Requested Exam Date: ________________ First Choice: __________________ Second Choice: ________________
Requested Exam Location: ________________ First Choice: __________________ Second Choice: ________________

You MUST fill in BOTH a First and Second Choice for Exam Date and Location

Applicant Information

Please read carefully and complete ALL items

Type or Print Legibly

☐ Mr.  ☐ Ms.

Last Name: __________________________ First Name: __________________________ Middle Initial: ______

Operator ID # (if known): __________________________ or Last 4 Digits of Social Security #: __________

Home Address

Street Address: __________________________ P.O. Box: __________ County: __________________________
City: __________________________ State: __________________ Zip Code: __________________________

Cell Phone #(with area code): __________________________ Home Phone #(with area code): __________________________
FAX # (with area code): __________________________ Work Phone #(with area code): __________________________

Home Email Address: __________________________ Date of Birth: __________

Work Email Address: __________________________

Education

Lack of completion of high school or GED will prevent certification as a Class K operator.

1. Can you read and write English?  ☐ Yes  ☐ No

2. Are you a high school graduate?  ☐ Yes Year Graduated: __________  ☐ No
If No, have you obtained a GED certificate?  ☐ Yes Year Obtained: __________  ☐ No

This Agency is authorized to request this information under 415 ILCS 5/4(b)(2012). Disclosure of this information is voluntary and no penalties will result from the failure to provide the information. However, the absence of the information could prevent your application from being processed or could result in denial of your application.
Current Industrial Wastewater Operator Experience

If you are applying for the general Class K-WR certification, leave this section blank and go to the Certification History.

Current Employment - Complete the following section as it relates to your current industrial wastewater operations employment. Your specific job duties and responsibilities as an industrial wastewater treatment works or pre-treatment works operator must be described in detail. Failure to specifically describe your job duties as a hands-on industrial wastewater operator will result in your application being returned.

Name of Facility Where You Are Currently Employed: ________________________________

Facility Address: ________________________________  NPDES Number: __________________

City: ________________________________  State: ________________________________  Zip Code: __________________

Phone (with area code): ________________________________  Start Date of Employment at this Facility: __________________

Your Job Title: ________________________________  Number of Hrs/Wk You Work: ______

Employment Information

- Full Time (30 hours or more/week)
- Part Time (less than 30 hours/week)
- Contractual

# of Hours Worked Contractually/Week: __________________

Name of Supervisor (Person To Whom You Report): __________________________________

Do you have a wastewater contract approved by the Illinois EPA?  □ Yes  □ No

Industrial Wastewater Operator Job Duties (BE SPECIFIC): (The box below will expand as needed)

Certification History

Complete the information below for ALL Illinois certifications received from ANY certifying authority (the box below will expand as needed).

1. Have you ever obtained or attempted to obtain a Certification of Technical Competency by fraud or deceit?  □ Yes  □ No

2. Have you ever demonstrated gross negligence or gross misconduct in the operation and/or maintenance of any wastewater treatment works?  □ Yes  □ No

3. Have you ever falsified, or willfully failed to maintain, or willfully not submitted, any records or reports required by the Environmental Protection Act?  □ Yes  □ No

4. Have you ever willfully violated the Illinois Environmental Protection Act or any rules adopted under the Act?  □ Yes  □ No

5. Have you ever been convicted of terrorism, making a terrorist threat, or causing a catastrophe?  □ Yes  □ No

6. Has a final judgment in a civil action, or a conviction in a criminal action, determined that you, the applicant, have performed any of the act listed above?  □ Yes  □ No

7. Have you ever been denied certification for any of the above reasons? Please explain all "Yes" responses for Items 1 - 7 (the box below will expand as needed)  □ Yes  □ No
8. Do you presently hold any certifications?  
   If yes, please provide the following information for all certifications presently held:

   Certification Level | Date Certified | Issued By | Program Type | Expiration Date
   --------------------|---------------|-----------|--------------|-----------------|
   |                  |              |           |              |                 |
   |                  |              |           |              |                 |
   |                  |              |           |              |                 |

   9. Have you ever had a certification sanctioned (revoked, suspended, or placed on probation)?  
   If yes, please provide the following information for each sanctioned certificate:

   Certification Level | Date Certified | Sanctioning Body | Sanction Date | Length of Sanction
   --------------------|---------------|------------------|--------------|------------------|
   |                  |              |                  |              |                 |
   |                  |              |                  |              |                 |
   |                  |              |                  |              |                 |

**Signatures**

**MUST BE COMPLETED AND SIGNED BY BOTH SUPERVISOR AND APPLICANT OR APPLICATION WILL BE RETURNED**

**SUPERVISOR VERIFICATION AND SIGNATURE** - Supervisor MUST review the information in this application AND verify that it is true and accurate. Supervisor MUST fill out, sign, and date this verification section of the application or it will be returned.

I hereby certify that _______________________________ is directly involved in the operation and/or maintenance of the _______________________________ industrial wastewater treatment or pretreatment works.

(Name of Industrial Wastewater Treatment Works)

The applicant has worked in this capacity as an Industrial Wastewater Operator: From: _______ To: _______.

(Date) (Date)

I hereby certify that I have reviewed this application and find that the information provided by the applicant is true and accurate to the best of my ability. I also verify with my initials that I have read and understand the legal statement below.

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**APPLICANT SIGNATURE** Applicant MUST sign and date this verification section of the application or the application will be returned.

I hereby certify that I have reviewed this application and find that the information provided by the applicant is true and accurate to the best of my ability. I also verify with my initials that I have read and understand the legal statement below.

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**Supervisor's Initials:**

Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h)). Falsification of any information in this application by either party, applicant or supervisor, will disqualify the application and be grounds for sanctions of current certificates held by either party (35 Ill. Adm. Code, Subtitle C, Chapter II, Part 380. Section 380.515(b)).

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**Applicant's Initials:**

Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h)). Falsification of any information in this application by either party, applicant or supervisor, will disqualify the application and be grounds for sanctions of current certificates held by either party (35 Ill. Adm. Code, Subtitle C, Chapter II, Part 380. Section 380.515(b)).